

2001 UNIFORM BUSINESS REPORT (UBR)

FILED
May 17, 2001 8:00 am
Secretary of State

05-17-2001 91281 009 ***150.00

DOCUMENT # **P96000057096**
 1. Entity Name **Bangco INC.**

Principal Place of Business **Bangco INC 9768 Bay Vista estate Blvd, ORLANDO, FL 32836**
 Mailing Address

A0067491

2. Principal Place of Business **ORLANDO, FL**
 Suite, Apt. #, etc.
 City & State
 Zip **Orange** Country **32836** Country **Orange**

3. Mailing Address **9768 Bay Vista estate Blvd.**
 Suite, Apt. #, etc.
 City & State **Orlando, FL**

4. FEI Number **59-3411734**
 Applied For ☒ Not Applicable

DO NOT WRITE IN THIS SPACE

5. Certificate of Status Desired ☐ **\$8.75** Additional Fee Required

6. Name and Address of Current Registered Agent
SYED IOBAL HAIDER
9768 Bay Vista Estate Blvd
Orlando, FL 32836

7. Name and Address of New Registered Agent
 Name
 Street Address (P.O. Box Number is Not Acceptable)
 City **FL** Zip Code

8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.
 SIGNATURE  DATE **4/26/01**
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

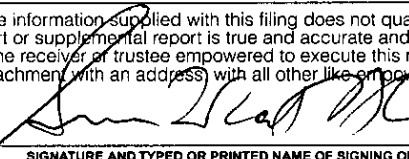
9. This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so. ☒ **FILE NOW!!! FEE IS \$150.00**
After MAY 1, 2001 Fee will be \$550.00
Make Check Payable to Department of State
 10. Election Campaign Financing Trust Fund Contribution. ☐ **\$5.00** May Be Added to Fees

11. **PRES.** OFFICERS AND DIRECTORS

TITLE	SHEIKH M. ALI	<input type="checkbox"/> Delete
NAME	4710 SOUTH ORANGE AVE	
STREET ADDRESS	ORLANDO, FL 32806	
CITY-ST-ZIP		
TITLE	MONATM PRES.	<input type="checkbox"/> Delete
NAME	SYED IOBAL HAIDER	
STREET ADDRESS	9768 Bay Vista Blvd, FL 32836	
CITY-ST-ZIP		
TITLE	SECRETARY	<input type="checkbox"/> Delete
NAME	MOHAMMED A. CHOWDHURY	
STREET ADDRESS	9768 Bay Vista Blvd.	
CITY-ST-ZIP	FL 32836	
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
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TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

13. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 11 or Block 12 if changed, or on an attachment with an address with all other like empowered.
 SIGNATURE:  **SHEIKH M. ALI** 4/26/01 (407) 716-7221
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

CR2E034 (11/00)