

2002 UNIFORM BUSINESS REPORT (UBR)

FILED
Jul 09, 2002 8:00 am
Secretary of State

07-09-2002 90019 037 ***550.00

DOCUMENT # P96000081509

1. Entity Name
WENVEST, INC.

Principal Place of Business

**5728 MAJOR BLVD
 STE 601
 ORLANDO FL 32819**

Mailing Address

**5728 MAJOR BLVD
 STE 601
 ORLANDO FL 32819**

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number

59-3403164

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
 Fee Required

DO NOT WRITE IN THIS SPACE



6. Name and Address of Current Registered Agent

**KHATIB, RASHID
 5728 MAJOR BLVD
 STE 601
 ORLANDO FL 32819**

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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

9. This corporation is eligible to satisfy its intangible tax filing requirement and elects to do so: ☐
 (See criteria on back)

FILE NOW!!! FEE IS \$550.00
After September 13, 2002 Fee will be \$750.00
Make Check Payable to Department of State

10. Election Campaign Financing
 Trust Fund Contribution. ☐

\$5.00 May Be
 Added to Fees

11. OFFICERS AND DIRECTORS

| | | |
|----------------|-------------------------|---------------------------------|
| TITLE | DC | <input type="checkbox"/> Delete |
| NAME | KHATIB, RASHID | |
| STREET ADDRESS | 5728 MAJOR BLVD STE 601 | |
| CITY-ST-ZIP | ORLANDO FL 32819 | |
| TITLE | D | <input type="checkbox"/> Delete |
| NAME | KHOURI, ZAH W | |
| STREET ADDRESS | 5728 MAJOR BLVD STE 601 | |
| CITY-ST-ZIP | ORLANDO FL 32819 | |
| TITLE | SD | <input type="checkbox"/> Delete |
| NAME | GOOD, M. CAR SON | |
| STREET ADDRESS | 5728 MAJOR BLVD STE 601 | |
| CITY-ST-ZIP | ORLANDO FL 32819 | |
| TITLE | PD | <input type="checkbox"/> Delete |
| NAME | HORNICK, FRANK | |
| STREET ADDRESS | 5728 MAJOR BLVD STE 601 | |
| CITY-ST-ZIP | ORLANDO FL 32819 | |
| TITLE | DV | <input type="checkbox"/> Delete |
| NAME | HODGE, RANDALL | |
| STREET ADDRESS | 5728 MAJOR BLVD STE 601 | |
| CITY-ST-ZIP | ORLANDO FL 32819 | |
| TITLE | T | <input type="checkbox"/> Delete |
| NAME | COUTY, MICHAEL | |
| STREET ADDRESS | 5728 MAJOR BLVD STE 601 | |
| CITY-ST-ZIP | ORLANDO FL 32819 | |

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 | |
| 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 | |
| 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:

SIGNATURE REQUIRED

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

7/02/02 (407) 354-2200

Date

Daytime Phone #

CR2E034 (4/02)