

**2000 UNIFORM BUSINESS REPORT (UBR)****FILED****Jan 09, 2000 08:00 AM****Secretary of State****DOCUMENT # P97000005698****1. Entity Name**

LIAQAT ZAMAN ASSOCIATES, INC.

**Principal Place of Business**

4281 S.W. 15 ST.

MIAMI

331343805

FL

**Mailing Address**

4281 S.W. 15 ST.

MIAMI

331343805

FL

**2. Principal Place of Business**

Suite, Apt. #, etc.

**3. Mailing Address**

Suite, Apt. #, etc.

**City & State****City & State**

Zip

Country

Zip

Country

**4. FEI Number****65-0729560****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**

KHAN MALIK SARDAR

4281 S.W. 15 ST.

MIAMI

331343805

FL

US

**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**

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

(NOTE: Registered Agent signature required when reinstating)

**01/09/2000**

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 \$150.00  
After MAY 1, 2000 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. OFFICERS AND DIRECTORS**

TITLE	D	<input type="checkbox"/> Delete
NAME	ZAMAN GULNAR	
STREET ADDRESS	MBC #16, P.O. BOX 3354	
CITY-ST-ZIP	RIYADH, SAUDI ARABIA	

TITLE	D	<input type="checkbox"/> Delete
NAME	ZAMAN SHAHID	
STREET ADDRESS	MBC #16, P.O. BOX 3354	
CITY-ST-ZIP	RIYADH, SAUDI ARABIA	

TITLE	D	<input type="checkbox"/> Delete
NAME	ZAMAN RASHID	
STREET ADDRESS	MBC #16, P.O. BOX 3354	
CITY-ST-ZIP	RIYADH, SAUDI ARABIA	

TITLE	D	<input type="checkbox"/> Delete
NAME	ZAMAN SAIMA	
STREET ADDRESS	MBC #16, P.O. BOX 3354	
CITY-ST-ZIP	RIYADH, SAUDI ARABIA	

TITLE	D	<input type="checkbox"/> Delete
NAME	ZAMAN YASMEEN	
STREET ADDRESS	MBC #16, P.O. BOX 3354	
CITY-ST-ZIP	RIYADH, SAUDI ARABIA	

TITLE	D	<input type="checkbox"/> Delete
NAME	ZAMAN LIAQUAT	
STREET ADDRESS	MBC #16, P.O. BOX 3354	
CITY-ST-ZIP	RIYADH, SAUDI ARABIA	

**12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11**

TITLE	D	<input checked="" type="checkbox"/> Change	<input type="checkbox"/> Addition
NAME	ZAMAN GULNAR		
STREET ADDRESS	MBC #16, P.O. BOX 3354		
CITY-ST-ZIP	RIYADH, SAUDI ARABIA		A

TITLE	D	<input checked="" type="checkbox"/> Change	<input type="checkbox"/> Addition
NAME	ZAMAN SHAHID		
STREET ADDRESS	MBC #16, P.O. BOX 3354		
CITY-ST-ZIP	RIYADH, SAUDI ARABIA		A

TITLE	D	<input checked="" type="checkbox"/> Change	<input type="checkbox"/> Addition
NAME	ZAMAN RASHID		
STREET ADDRESS	MBC #16, P.O. BOX 3354		
CITY-ST-ZIP	RIYADH, SAUDI ARABIA		A

TITLE	D	<input checked="" type="checkbox"/> Change	<input type="checkbox"/> Addition
NAME	ZAMAN SAIMA		
STREET ADDRESS	MBC #16, P.O. BOX 3354		
CITY-ST-ZIP	RIYADH, SAUDI ARABIA		A

TITLE	D	<input checked="" type="checkbox"/> Change	<input type="checkbox"/> Addition
NAME	ZAMAN YASMEEN		
STREET ADDRESS	MBC #16, P.O. BOX 3354		
CITY-ST-ZIP	RIYADH, SAUDI ARABIA		A

TITLE	D	<input checked="" type="checkbox"/> Change	<input type="checkbox"/> Addition
NAME	ZAMAN LIAQUAT DR.		
STREET ADDRESS	MBC #16, P.O. BOX 3354		
CITY-ST-ZIP	RIYADH, SAUDI ARABIA		A

**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: Liaquat Zaman

PTSC 01/09/2000