## 2002 UNIFORM BUSINESS REPORT (UBR)

## DOCUMENT# P97000012484

Entity Name: MADINA, INC.

FILED Apr 20, 2002 8:00 AM Secretary of State

Current Principal Place of Business: 110 E BYRD AVE			New Principal Place of Business:		
Current Mailing Address:  110 EAST BYRD AVENUE			New Mailing Address:		
BONIFAY, FL 32425 US					
.,			Name and Address of New Registered Agent:		
TARIQ ISMAIL, AHMAD 110 E BYRD AVENUE BONIFAY, FL 32425					
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:					
Electronic Signature of Registered Agent Date					
This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so (X).  Election Campaign Financing Trust Fund Contribution ( ).					
OFFICERS AND DIRECTORS:			ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:		
Title: Name: Address: City-St-Zip:	P ( ISMAIL, AHMA 110 EAST BYF BONIFAY, FL	RD AVENUE	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	DV ( ISMAIL, AASIA 110 EAST BYR BONIFAY, FL	RD AVENUE	Title: Name: Address: City-St-Zip:	DV (X) Change ( ) Addition ISMAIL, FATIMA 110 EAST BYRD AVENUE BONIFAY, FL 32425	
Title: Name: Address: City-St-Zip:	ST ( ANEES, MOHA 1652 BRICKY, CHIPLEY, FL	ARD ROAD	Title: Name: Address: City-St-Zip:	ST (X) Change ( ) Addition ISMAIL, FATIMA 110 E>BYRD AVE. BONIFAY, FL 32425	
Title: Name: Address: City-St-Zip:	ISMAIL, FATIN	WEEKS STREET	Title: Name: Address: City-St-Zip:	D (X) Change ( ) Addition ISMAIL, FATIMA RT. 1, BOX 35 WEEKS STREET BONIFAY, FL 32425	
Title: Name: Address: City-St-Zip:	D ( ANEES, KAUK 1652 BRICKY CHIPLEY, FL	ARD ROAD	Title: Name: Address: City-St-Zip:	D (X) Change ( ) Addition ISMAIL, AHMAD TARIQ 110 E.BYRD AVE. BONIFAY, FL 32425	

I hereby certify that the information supplied with this filing does not qualify for the 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 electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: AHMAD TARIQ ISMAIL P 04/20/2002