## 2000 UNIFORM BUSINESS REPORT (UBR)

## FILED Feb 15, 2000 8:00 am Secretary of State DOCUMENT # P9700090611 1. Entity Name YASAT USA, INC. 02-15-2000 90031 023 \*\*\*150.00 Principal Place of Business Mailing Address 3316 NE 42ND COURT 4030 N OCEAN BLVD FT. LAUDERDALE FL 33308-6010 FT. LAUDERDALE FL 33308 1 1 3 2 7 3 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE Suite, Apt. #, etc. Applied For City & State City & State 4. FEI Number 65-0793071 Not Applicable Zip Country \$8.75 Additional Country 5. Certificate of Status Desired Fee Required 7. Name and Address of New Registered Agent 6. Name and Address of Current Registered Agent Name MANAV MUKBIL -OZAN Street Address (P.O. Box Number is Not Acceptable) MANAV, M. OZAN **3316 NE 42ND COURT** 3316 NE FT. LAUDERDALE FL 33308 42nd COURT CITY FORT LAWERDALE 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 FILE NOW!!! FEE IS \$150.00 9. This corporation is eligible to satisfy its Intangible 10. Election Campaign Financing \$5.00 May Be After MAY 1, 2000 Fee will be \$550.00 Tax filing requirement and elects to do so. Trust Fund Contribution. Added to Fees Make Check Payable to Department of State (See criteria on back) ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 OFFICERS AND DIRECTORS 12. 11. n Delete TITLE MA PRESIDENT TITLE MANAV, H. YASAT NAME HUSEYN MANAV NAME YASAT STREET ADDRESS STREET ADDRESS 21 FORT ROYAL ISLE 21 FORT CITY-ST-7IP FORT LAUDERDALE, FL CITY-ST-ZIP FT. LAUDERDALE FL 33308 Delete Addition Vice President TITLE TITLE OZAN MANAV, M. OZAN NAME MUKBIL NAME 42nd COURT STREET ADDRESS 3316 NE STREET ADDRESS **3316 NE 42ND COURT** FORT LAUDERDALE, FL CITY-ST-ZIP FT. LAUDERDALE FL 33308 CITY-ST-ZIP Delete TITLE BANU MANAV BANU. NAME 3316 NE 42nd COURT NAME STREET ADDRESS STREET ADDRESS 3316 NE 42ND COURT LAUDERDALE, FL 33308 CITY-ST-ZIP CITY - ST - ZIP FT. LAUDERDALE FL 33308 Addition ☐ Delete TITLE TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Delete TITLE Change Addition TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Change ☐ Addition ☐ Delete TITLE TITLE NAME NAME

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 eath; 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.

STREET ADDRESS

CITY-ST-ZIP

STREET ADDRESS

CITY-ST-ZIP

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR