

2002 UNIFORM BUSINESS REPORT (UBR)

0354612 AV

DOCUMENT # P98000009457

1. Entity Name
YOUNG WORLD INC.

FILED

02 NOV 25 PM 3:17

Principal Place of Business

1225 W 45TH ST #504
MANGONIA PARK FL 33407

Mailing Address

1225 W 45TH ST #504
MANGONIA PARK FL 33407

SECRETARY OF STATE
TALLAHASSEE, FLORIDA



2. Principal Place of Business

3. Mailing Address

20030 N.E 21ST Ave

Suite, Apt. #, etc.

Suite, Apt. #, etc.

DO NOT WRITE IN THIS SPACE

City & State

City & State
North Miami Beach Fls

4. FEI Number 65-0837570

Applied For
Not Applicable

Zip

Country

Zip 33179

Country

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

6. Name and Address of Current Registered Agent

HAMED, GALAL H
1225 W 45TH ST #504
MANGONIA PARK FL 33407

7. Name and Address of New Registered Agent

Name

LOUIS R. Smith

Street Address (P.O. Box Number is Not Acceptable)

20030 N.E 21ST Ave

City

North Miami

FL

Zip Code

33179

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)

DATE

10/14/02

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, 2002 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 PD
NAME HAMED, GALAL H
STREET ADDRESS 1225 W 45TH ST #504
CITY-ST-ZIP MANGONIA PARK FL 33407 ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Delete

TITLE
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STREET ADDRESS
CITY-ST-ZIP ☐ Delete

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CITY-ST-ZIP ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Delete

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Change ☐ Addition

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CITY-ST-ZIP ☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Change ☐ Addition

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 AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E034 (9/01)

11/20/02

To: Division of Corporations

Subject: Young World Inc.
Annual Report 2002

As per various conversations with your department, the first report you sent was received on September 4, 2002. It is not my fault this was received so late. The second report was never received. I ask that you reinstate my corporation. You have already cashed my check for the original fee of \$150.00

Sincerely yours,

Galalh Hamed



President