## 2000 UNIFORM BUSINESS REPORT (UBR)

## FILED Apr 24, 2000 8:00 am Secretary of State DOCUMENT # **P98000073864** SAEEDA ENTERPRISES, INC. 04-24-2000 90079 013 \*\*\*150.00 Principal Place of Büsiness Mailing Address 9600 S.W. 77TH AVENUE: ---- S.W. 77TH AVENUE MIAMI FL 33156-2615 FL 33156 3. Mailing Address Principal Place of Business DO NOT WRITE IN THIS SPACE Suite Apt # etc. Suite, Apt. #, etc. Applied For City & State City & State 4. FEI Number 59-3532866 Not Applicable Country Zip Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 7. Name and Address of New Registered Agent -6. Name and Address of Current Registered Agent Name YASIN, AMIR Street Address (P.O. Box Number is Not Acceptable) 9600 S.W. 77TH AVENUE **MIAMI FL 33156** 3. 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. (President) (NOTE: Registered Agent signature required when reinstating) FILE NOW!!! FEE IS \$150.00 9. This corporation is eligible to satisfy its Intangible 10. Election Campaign Financing \$5.00 May Be Tax filing requirement and elects to do so. After MAY 1, 2000 Fee will be \$550.00 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. íí. **PSD** Change ☐ Addition ☐ Delete NAME YASIN, AMIR STREET ADDRESS 9600 S.W. 77TH AVENUE .... . AINNO W CITY-ST-ZIP ST.7IP **MIAMI FL 33156** Change Addition TITLE ☐ Delete NAME STREET ADDRESS WHEET ADDRESS CITY-ST-7IP ST ZIP Change ■ Addition Delete TITLE NAME STREET ADDRESS arage Appenens CITY-ST-7IP ST-ZIP Change □ Addition ☐ Delete NAME STREET ADDRESS CITY-ST-7IP ☐ Change ☐ Addition ☐ Delete STREET ADDRESS ang Angales CITY-ST-ZIP ST - ZIP Change ☐ Addition ☐ Delete TITLE NAME STREET ADDRESS ATTRICT ADDRESS CITY-ST-ZIP 13. I hereby certify that the information supplied with this filling 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.

CR2E034 (9/99