

2001 UNIFORM BUSINESS REPORT (UBR)

FILED
May 03, 2001 8:00 am
Secretary of State

05-03-2001 91122 034 ***150.00

DOCUMENT # P98000092819

1. Entity Name

E.D.I. II INVESTMENTS, INC.

Principal Place of Business

**5728 MAJOR BOULEVARD #304
 ORLANDO FL 32819**

Mailing Address

**5728 MAJOR BOULEVARD #304
 ORLANDO FL 32819**

2. Principal Place of Business

5728 Major Blvd

Suite 174

Orlando, FL

Zip 32819

Country

3. Mailing Address

5728 Major Blvd

Suite 174

Orlando FL

Zip 32819

Country



DO NOT WRITE IN THIS SPACE

4. FEI Number **59-3611145**

Applied For

Not Applicable

5. Certificate of Status Desired ☐

**\$8.75 Additional
 Fee Required**

6. Name and Address of Current Registered Agent

**DIAB, MOHAMMED
 5728 MAJOR BOULEVARD #304
 ORLANDO FL 32819**

7. Name and Address of New Registered Agent

Mohammed Dial

5728 Major Blvd

Suite 174

Orlando 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 **Mohammed Dial** DATE **4/30/2001**

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, 2001 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** ☐ Delete
 NAME **ELIAS, ADIL R DR.**
 STREET ADDRESS **115 PALMER AVENUE**
 CITY-ST-ZIP **WINTER PARK FL 32789**

TITLE **D** ☐ Delete
 NAME **ELIAS, AIDA A MRS.**
 STREET ADDRESS **115 PALMER AVENUE**
 CITY-ST-ZIP **WINTER PARK FL 32789**

TITLE **D** ☐ Delete
 NAME **DIAB, MOHAMMED MR.**
 STREET ADDRESS **5728 MAJOR BOULEVARD #304**
 CITY-ST-ZIP **ORLANDO FL 32819**

TITLE ☐ Delete
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE ☐ Delete
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE ☐ Delete
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

☐ Change ☐ Addition

TITLE
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

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

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

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 **Mohammed Dial** DATE **4/30/2001** DAYTIME PHONE **352-0175**

CR2E034 (10/00)

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