

2001 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P98000103275

1. Entity Name
ALNOBANI INVESTMENT, INC.

FILED
Apr 26, 2001 8:00 am
Secretary of State
04-26-2001 90031 043 ***150.00

Principal Place of Business

Mailing Address

~~501 S. CENTRAL AVENUE~~
~~UMITILLA FL 32784~~

~~501 S. CENTRAL AVENUE~~
~~UMITILLA FL 32784~~

2. Principal Place of Business

3. Mailing Address

138 Beachcomber St

138 Beachcomber St.

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

Daytona Beach, FL

City & State

Daytona Beach, FL

Zip

Country

32118

Zip

Country

32118

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

ALNOBANI, AZMI

~~501 S. CENTRAL AVENUE~~
~~UMITILLA FL 32784~~

Name

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

138 Beachcomber Street

City

Daytona Beach

Zip Code

32118

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 re-registering)

DATE

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

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE ☐ Delete
NAME P
STREET ADDRESS ALNOBANI, AZMI
CITY-STATE-ZIP ~~501 S. CENTRAL AVE~~
~~UMITILLA FL 32784~~

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS 138 Beachcomber Street
CITY-STATE-ZIP Daytona Beach, FL 32118

TITLE ☐ Delete
NAME VPT
STREET ADDRESS ALNOBANI, MUNIR
CITY-STATE-ZIP ~~501 S. CENTRAL AVE~~
~~UMITILLA FL 32784~~

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS 138 Beachcomber St.
CITY-STATE-ZIP Daytona Beach, FL 32118

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-STATE-ZIP

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

TITLE ☐ Delete
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TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-STATE-ZIP

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

13. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(c), 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]

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4.18.01

Date

Daytona Beach, FL

CR2E034 (10/00)