

# 2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P99000013886

1. Entity Name  
KHUBAIB TEXTILE AND KNIT WEAR, INC.

**FILED**  
**Jul 13, 2000 8:00 am**  
**Secretary of State**

07-13-2000 90022 036 \*\*\*150.00

Principal Place of Business  
1107 PERSON ST.  
KISSIMMEE FL 34741

Mailing Address  
1107 PERSON ST.  
KISSIMMEE FL 34741



DO NOT WRITE IN THIS SPACE

2. Principal Place of Business

3. Mailing Address

P.O. BOX 422859

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State  
KISSIMMEE, FLORIDA

4. FEI Number

59-3555536

Applied For

Not Applicable

Zip

Country

Zip  
34742-2859

Country

OSCEOLA

5. Certificate of Status Desired ☐

**\$8.75** Additional  
Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

MALDONADO, YANIRA E  
1107 PERSON ST.  
KISSIMMEE FL 34741

Name

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

City

**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 Yanira Maldonado YANIRA, MALDONADO

07-10-00

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

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 \$550.00**  
**After SEPTEMBER 13, 2000 Min. will be \$750.00**  
**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 **D** ☐ Delete  
NAME **KHAN, AAMIR**  
STREET ADDRESS **1107 PERSON ST.**  
CITY-ST-ZIP **KISSIMMEE FL 34741**

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

TITLE **D** ☐ Delete  
NAME **MUJAHID, MEHMOOD A**  
STREET ADDRESS **1107 PERSON ST.**  
CITY-ST-ZIP **KISSIMMEE FL 34741**

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

TITLE **D** ☐ Delete  
NAME **KHAN, KHUBAIB A**  
STREET ADDRESS **1107 PERSON ST.**  
CITY-ST-ZIP **KISSIMMEE FL 34741**

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

TITLE **D** ☐ Delete  
NAME **KHAN, MOHAMMED S**  
STREET ADDRESS **1107 PERSON ST.**  
CITY-ST-ZIP **KISSIMMEE FL 34741**

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

TITLE ☐ Delete  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

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

TITLE ☐ Delete  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

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:

**SIGNATURE REQUIRED**  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

MUJAHID, MEHMOOD A

407-933-2444

Date

Daytime Phone #

CR2E034 (5/00)

Attachment  
D# P99000013886  
0069965

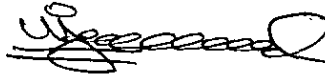
DIVISION OF CORPORATION  
P.O.BOX 6327  
TALLAHASSEE,FL 32314.

~~DEAR SIR OR MADAM~~

THIS NOTE IS TO INFORM YOU THAT WE DIDNOT RECEIVE THE  
FIRST NOTICE OF 2000 UNIFORM BUSINESS REPORT AND WE  
RECEIVED THE SECOND NOTICE .

ENCLOSED: THE CHECK OF\$150.00 WITH THANKS.

SINCERELY



KHUBAIB TEXTILE AND KNIT WEAR,INC  
DOCUMENT # P99000013886  
1107 PERSON STREET  
KISSIMMEE,FLORIDA 34741.

DATE: 07-10-00