

2001 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P99000016044

1. Entity Name

MARTNI SARASOTA II, INC.

FILED
May 02, 2001 8:00 am
Secretary of State

05-02-2001 90106 038 ***150.00

0070582

Principal Place of Business

Mailing Address

5401 KIRKMAN ROAD
SUITE 725
ORLANDO FL 32819

5401 KIRKMAN ROAD
SUITE 725
ORLANDO FL 32819

2. Principal Place of Business

3. Mailing Address

5728 MAJOR BLVD

5728 MAJOR BLVD

Suite, Apt. #, etc.

Suite, Apt. #, etc.

Suite 601

Suite 601

City & State

City & State

Orlando FL

Orlando FL

Zip

32819

Country

US

Zip

32819

Country

US

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

KHATIB, RASHID A
5401 KIRKMAN ROAD
SUITE 725
ORLANDO FL 32819

Name

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

5728 MAJOR BLVD., STE. 601

City ORLANDO FL 32819

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

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 \$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	DPTS	<input type="checkbox"/> Delete
NAME	KHATIB, RASHID A	
STREET ADDRESS	5401 KIRKMAN ROAD STE 725	
CITY-ST-ZIP	ORLANDO FL 32819	
TITLE	VP	<input type="checkbox"/> Delete
NAME	HODGE, RANDALL R	
STREET ADDRESS	5401 KIRKMAN ROAD STE 725	
CITY-ST-ZIP	ORLANDO FL 32819	
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

TITLE		<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS	5728 MAJOR BLVD., STE. 601	
CITY-ST-ZIP	ORLANDO FL 32819	
TITLE	VP	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS	5728 MAJOR BLVD., STE. 601	
CITY-ST-ZIP	ORLANDO FL 32819	
TITLE	D	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	Khouri, Zahi W	
STREET ADDRESS	5728 MAJOR BLVD., STE 601	
CITY-ST-ZIP	Orlando FL 32819	
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> 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 AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Rashid A Khatib
President

Date

Daytime Phone #

4/16/01 (407) 354-2200

CR2E034 (10/00)