

2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P99000017646

FILED

00 SEP 20 AM 10:13

SECRETARY OF STATE
TALLAHASSEE FLORIDA

DO NOT WRITE IN THIS SPACE

1. Entity Name STAAH ENTERPRISES, INC.			
Principal Place of Business 11540 WALSINGHAM RD. LARGO FL 33774		Mailing Address 11540 WALSINGHAM RD. LARGO FL 33778-2513	
2. Principal Place of Business 14077 Gulf Blvd Suite, Apt. #, etc.		3. Mailing Address 45-25 Queens Blvd Suite, Apt. #, etc. Suite 704	
City & State Madreia Beach, FL		City & State Rego Park, N.Y.	
Zip 33708	Country USA	Zip 11374	Country USA

4. UBT Number	☒ Request Fee ☐ Not Applicable
---------------	--

5. Continuation of Status Desired	☐ \$8.75 Additional Fee Required
-----------------------------------	---

6. Name and Address of Current Registered Agent BURNS, PAUL J 12525 WALSINGHAM RD. LARGO FL 33774		7. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) 000003408720-5 09/28/00-01105-011 ***550.00-***550.00 City FL	
---	--	--	--

8. The above named entity submits this statement for the purpose of changing its residential office or registered agent, or both, in the State of Florida.

SIGNATURE

[Signature]
Signature, typed or printed name of registered agent and date of signature

[Signature]
Signature, typed or printed name of filer and date of signature

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, 2000 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. ADDITIONAL CHANGES TO OFFICERS AND DIRECTORS (SEE 1)			
TITLE	D	☒ Delete		TITLE	D	☒ Change	☐ Addition
NAME	BANDUKRA, SABIHA			NAME	BANDUKRA SABIHA		
STREET ADDRESS	11540 WALSINGHAM RD.			STREET ADDRESS	24 MARGIE ST		
CITY-STATE-ZIP	LARGO FL 33774			CITY-STATE-ZIP	OCEANSIDE, NY 11572		
TITLE	D	☒ Delete		TITLE	D	☒ Change	☐ Addition
NAME	HIMANI, SABINA			NAME	HIMANI, SABINA		
STREET ADDRESS	11540 WALSINGHAM RD.			STREET ADDRESS	10 POLO DRIVE		
CITY-STATE-ZIP	LARGO FL 33774			CITY-STATE-ZIP	OLD WESTBURY NY 11568		
TITLE	D	☒ Delete		TITLE	D	☒ Change	☐ Addition
NAME	KAPOOR, SANEH			NAME	KAPOOR SANEH		
STREET ADDRESS	11540 WALSINGHAM RD.			STREET ADDRESS	171 SOUNDVIEW DRIVE		
CITY-STATE-ZIP	LARGO FL 33774			CITY-STATE-ZIP	PORT WASHINGTON, NY 11050		
TITLE	D	☒ Delete		TITLE	D	☒ Change	☐ Addition
NAME	SHAH, SULEMAN			NAME	SHAH, SULEMAN		
STREET ADDRESS	11540 WALSINGHAM RD.			STREET ADDRESS	8 LANDING COURT		
CITY-STATE-ZIP	LARGO FL 33774			CITY-STATE-ZIP	DIX HILLS, NY 11746		
TITLE	D	☒ Delete		TITLE	D	☒ Change	☐ Addition
NAME	TAUFIQ, SAL			NAME	TAUFIQ, SAL		
STREET ADDRESS	11540 WALSINGHAM RD.			STREET ADDRESS	203-176 AVE EAST		
CITY-STATE-ZIP	LARGO FL 33774			CITY-STATE-ZIP	CEDINGPON SHORE, FL 33708		
TITLE		☐ Delete		TITLE		☐ Change	☐ Addition
NAME				NAME			
STREET ADDRESS				STREET ADDRESS			
CITY-STATE-ZIP				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(9)(b), 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 of this report.

SIGNATURE

[Signature]

KE