

2001 UNIFORM BUSINESS REPORT (UBR)

FILED
May 19, 2001 8:00 am
Secretary of State

05-19-2001 90277 037 ***158.75

DOCUMENT # P99000023492

1. Entity Name

THE KHARROUBI MANAGEMENT GROUP, INC.

Principal Place of Business

4711 W. WATERS AVE. #227
TAMPA, FL 33614

Mailing Address

Same

2. Principal Place of Business

4711 W. WATERS AVE
 Suite, Apt. #, etc.
#227

2. Mailing Address

4711 W. WATERS AVE
 Suite, Apt. #, etc.
#227

City & State

TAMPA FL

City & State

TAMPA FL

Zip

33614

Country

USA

Zip

33614

Country

USA

4. FEI Number

593508583

Applied For

☐ Not Applicable

5. Certificate of Status Desired

☒

\$8.75 Additional Fee Required

DO NOT WRITE IN THIS SPACE

768414

6. Name and Address of Current Registered Agent

EVANS, FELICIA L.
4711 W. WATERS AVE. #227
TAMPA, FL 33614

7. Name and Address of New Registered Agent

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

Felicia L. Evans, President

5-1-01

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 \$250.00

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	President	☐ Delete
NAME	Felicia L. Evans	
STREET ADDRESS	4711 W. WATERS AVE. #227	
CITY-ST-ZIP	TAMPA, FL 33614	
TITLE	Vice President	☐ Delete
NAME	Karim Kharrubi	
STREET ADDRESS	5705 Erhardt Dr.	
CITY-ST-ZIP	Riverview, FL 33569	
TITLE		☐ Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
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

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

Karim Kharrubi, Vice President

Date

5-1-01 813-247-3658 x-316

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Daytime Phone #

CR2E034 (11/00)