

2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P99000032534

1. Entity Name
Malik & Jahanzeb, Inc.

FILED
May 09, 2000 8:00 am
Secretary of State

05-09-2000 90017 006 ***150.00

Principal Place of Business Mailing Address
2049 Havendale Blvd. 2049 Havendale Blvd.
Winter Haven, Fl. 33881 Winter Haven, Fl. 33881

2. Principal Place of Business 3. Mailing Address
Suite, Apt. #, etc. Suite, Apt. #, etc.
City & State City & State
Zip Country Zip Country

4. FEI Number Applied For
59-3568562 Not Applicable

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

6. Name and Address of Current Registered Agent

Robert W. Angus
1362 Havendale Blvd.
Winter Haven, Fl. 33881

7. Name and Address of New Registered Agent

Name Malik Baloch
Street Address (P.O. Box Number is Not Acceptable)
1550 11th Street, Apt. G2
City Winter Haven FL Zip Code 33881

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

Malik Baloch

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, 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

TITLE	Secretary/Treasurer	<input type="checkbox"/> Delete
NAME	Malik Baloch	
STREET ADDRESS	1550 11th Street, Apt. G2	
CITY-ST-ZIP	Winter Haven, Fl. 33881	
TITLE	Vice President	<input type="checkbox"/> Delete
NAME	Shiraz Hasnani	
STREET ADDRESS	2126 Greenway Drive	
CITY-ST-ZIP	Winter Haven, Fl. 33881	
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		

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

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	
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 another like empowered.

SIGNATURE:

Malik Baloch

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E034 (9/99)