

2002 UNIFORM BUSINESS REPORT (UBR)

FILED
May 13, 2002 8:00 am
Secretary of State

05-13-2002 90133 006 ***150.00

DOCUMENT # P99000037752

1. Entity Name
LE JARDIN, INC.

Principal Place of Business

1960 DOWNS COURT
LAKE MARY FL 32746

Mailing Address

1960 DOWNS COURT
LAKE MARY FL 32746

2. Principal Place of Business

3. Mailing Address

5934, RED BUG LAKE RD

Suite, Apt. #, etc. 5934, RED BUG LAKE RD. WINTER SPRINGS, FL 32708

Suite, Apt. #, etc.

City & State

FL

City & State

WINTER SPRINGS, FL

Zip

32708

Country

Seminole

Zip

32708

Country

SEMINOLE

6. Name and Address of Current Registered Agent

SCHOLIN, CHRISTIAN N

505 S. FLAGLER DR.

WEST PALM BEACH FL 33401

7. Name and Address of New Registered Agent

Name

BENOMAR Chakib

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

5934, RED BUG LAKE RD

City

WINTER SPRINGS FL

Zip Code

32708

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]

(NOTE: Registered Agent signature required when reinstating)

DATE

4-24-02

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, 2002 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	DPVT	<input type="checkbox"/> Delete
NAME	BENOMAR, CHAKIB	(PRESIDENT)
STREET ADDRESS	1960 DOWNS COURT	
CITY-ST-ZIP	LAKE MARY FL 32746	
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 type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE	(DIRECTOR)	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	BENOMAR MARTINA	
STREET ADDRESS	5934, RED BUG LAKE RD	
CITY-ST-ZIP	WINTER SPRINGS, FL 32708	
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]

Date

Daytime Phone #

4-24-02

CR2E034 (9/01)