

2000 UNIFORM BUSINESS REPORT (UBR)

FILED
Jul 13, 2000 8:00 am
Secretary of State

06-08-2000 90033 005 ***150.00

DOCUMENT # P95000040384
1. Entity Name
 Neena Trading Corp R

Principal Place of Business
 100 Lakeview Dr
 #109 - Weston
 FLA-33326

2. Principal Place of Business
 100 Lakeview Dr
 Suite, Apt. #, etc.
 #109
City & State
 Weston FLA
Zip
 33326
Country
 USA

3. Mailing Address
 100 Lakeview Dr
 Suite, Apt. #, etc.
 #109
City & State
 Weston FLA
Zip
 33326
Country
 USA

DO NOT WRITE IN THIS SPACE

4. FEI Number
 16-00-334172-20-9
Applied For
 Not Applicable
5. Certificate of Status Desired ☐ **\$8.75 Additional Fee Required**

6. Name and Address of Current Registered Agent
 Anjum Khurshid
 100 Lakeview Dr #109
 Weston FL-33326

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
 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 ☐ **\$5.00 May Be Added to Fees**
 Trust Fund Contribution.

11. OFFICERS AND DIRECTORS

TITLE NAME STREET ADDRESS CITY-ST-ZIP	Anjum KHURSHID <input type="checkbox"/> Delete 100 Lakeview Dr #109 Weston FL-33326
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE NAME STREET ADDRESS CITY-ST-ZIP	Anjum Khurshid <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition 100 Lakeview Dr #109 Weston FLA 33326
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
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TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition

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]
 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR
 05/24/00 954-316-8669
 Date Daytime Phone #

CR2E034 (9/99)