

# 2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P99000082649

1. Entity Name  
HEBAH INC.

**FILED**  
**May 31, 2000 8:00 am**  
**Secretary of State**

05-31-2000 90041 026 \*\*\*150.00

Principal Place of Business

631 U.S. HIGHWAY ONE  
SUITE 404  
NORTH PALM BEACH FL 33408

Mailing Address

631 U.S. HIGHWAY ONE  
SUITE 404  
NORTH PALM BEACH FL 33408-4621

2. Principal Place of Business

4947 PURDY LANE

3. Mailing Address

4947 PURDY LANE

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

WPB; FL

City & State

WPB; FL

4. FEI Number

65-0954219

Applied For

Not Applicable

Zip

33415

Country

USA

Zip

33415

Country

USA

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

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

ANDERSON, TIMOTHY K ESQ.  
631 U.S. HIGHWAY ONE  
SUITE 404  
NORTH PALM BEACH FL 33408

Name

MOHSIN -A- KHAN

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

4947 PURDY LANE

City

WEST PALM BEACH FL

Zip Code

33415

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 Trust Fund Contribution. ☐

\$5.00 May Be Added to Fees

11. OFFICERS AND DIRECTORS

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE D ☐ Delete  
NAME KHAN, TAHSEEN B  
STREET ADDRESS 5040 FOXHALL DRIVE NORTH 4947 Purdy LN  
CITY-ST-ZIP WEST PALM BEACH FL 33417 33415

TITLE D ☒ Change ☐ Addition  
NAME KHAN TAHSEEN B  
STREET ADDRESS 4947 PURDY LANE  
CITY-ST-ZIP WEST PALM BEACH, FL 33415

TITLE D ☐ Delete  
NAME KHAN, MOHSIN A  
STREET ADDRESS 5040 FOXHALL DRIVE NORTH 4947 Purdy LN  
CITY-ST-ZIP WEST PALM BEACH FL 33417 33415

TITLE D ☒ Change ☐ Addition  
NAME KHAN MOHSIN A  
STREET ADDRESS 4947 PURDY LANE  
CITY-ST-ZIP WEST PALM BEACH, FL 33415

TITLE ☐ Delete  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

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

TITLE ☐ Delete  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition  
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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: \*

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

5/22/00 (561) 642-7527

CR2E034 (9/99)