

FILED
May 23, 2001 8:00 am
Secretary of State

05-23-2001 91153 008 ***150.00

1. Entity Name

SAKIB & BROTHERS, INC.

Principal Place of Business	Mailing Address
1776 W. EAGLE TRACE BLVD. CORAL SPRINGS, FL 33071	1776 W. EAGLE TRACE BLVD. CORAL SPRINGS, FL 33071

100043

2. Principal Place of Business SAME AS ABOVE Suite, Apt. #, etc.	3. Mailing Address 1776 W. EAGLE TRACE BLVD Suite, Apt. #, etc. CORAL SPRINGS
City & State	City & State FLORIDA

DO NOT WRITE IN THIS SPACE

Zip	Country	Zip	Country	5. Certificate of Status Desired ☐	\$8.75 Additional Fee Required
		33071	U.S.A.		

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

HUSSAIN, AKHTAR
2465 N. W. 7th St.
Miami, FL 33125

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

(AOF) Appointed Agent signature requires alien reentering

DATE _____

9. This corporation is eligible to satisfy its intangible tax filing requirement and elects to do so. (See criteria on back) ☐ ☒

10. Election Campaign Financing Trust Fund Contribution.

**\$5.00 May Be
Added to Fees**

11. OFFICERS AND DIRECTORS

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE
NAME BHAIJI, NASREEN
STREET ADDRESS 1776 W. Eagle Trace Blvd.
CITY - ST - ZIP CORAL SPRINGS, FL 33071

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

TITLE	VP	☐ Deleted
NAME	BHAIJI, SAQIB	
STREET ADDRESS	1776 W. EAGLE TRACE BLVD.	
CITY-ST-ZIP	CORAL SPRINGS, FL 33071	

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

TITLE	D	☐ Delete
NAME	BHAUJI, FAHAD	
STREET ADDRESS	1776 W. Eagle Trace Blvd.	
CITY - ST - ZIP	CORAL SPRINGS, FL 33071	

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

FILE	0	☐ Delete
NAME	BHAJIJI, FAWAD	
STREET ADDRESS	1776 W. EAGLE TRACE BLVD.	
CITY - ST. ZIP	CORAL SPRINGS, FL 33071	

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

TITLE
 NAME
 STREET ADDRESS
 CITY-STATE-ZIP

TITLE _____

NAME _____

STREET ADDRESS _____

CITY - ST - ZIP _____

TITLE	☐ Delete
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 included 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:

INITIALS AND TYPED OR PRINTED NAME OF SIGNING OFFICER: A DIRECTOR

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Nexting Floor's A