04/27/2001 13:00 3058910112 DADE CTY BU

2001 UNIFORM BUSINESS REPORT (UBR)

FILED
May 22, 2001 8:00 am
Secretary of State
05-22-2001 90061 013 ***150.00

DOCUMENT # P99000088525 Division of C

1. Entity Name

FAZAL AND FATMA, INC.

Principal Place of Business	Mailing Address
1101 S. Federal Hwy Pompano Beach, Fl 33062	~~8424 NW 23rd Manor Coral Springs, Fl 33065~~

D00056488

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business	3. Mailing Address
1101. S. FED HWY	1101 S. FED. HIGHWAY, POMPANO BCH FL 33062
Suite, Apt. #, etc.: POMPANO BCH. FL	Suite, Apt. #, etc.: POMPANO BCH.
City & State: POMPANO BCH	City & State: FLORIDA
Zip: 33062 Country: U.S.A	Zip: 33062 Country: U.S.A

4. FEI Number 65-0946416 ☐ Applied For ☐ Not Applicable

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

6. Name and Address of Current Registered Agent

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

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) ☐

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		
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D BHAIJI, MOHAMMAD M. 1776 W. Eagle Trace Blvd. Pompano Beach, Fl 33071	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D BHAIJI, NASREEN A. 1776 W. Eagle Trace Blvd. Pompano Beach, Fl 33071	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Change ☐ Addition
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CR2E034 (11/00)

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: X [signature] 04/30/01
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #