## 2000 UNIFORM BUSINESS REPORT (UBR)

	UNIFORM BUS		RT (UE	SR)		LED	
DOCUMENT # P9900098445  1. Entity Name				Jun 06, 2000 8:00 an Secretary of State			
ZAMZAN	1 USA, INC.					9 01 State 020 034 ***150.00	
Principal Plac	e of Business	Mailing Address					
833 W. SAMPLE ROAD POMPANO BEACH FL 33064		833 W. SAMPLE ROAD POMPANO BEACH FL 33064-2002			, [		
2. Principal P	lace of Business	3. Mailing Address					
Suite, Apt. #, etc.		Suite, Apt. #, etc.			DO NOT WRITE IN THIS	IAIBI IAIII AIDII AIDDI EIII 1881 SSPACE	
City & State		City & State			4. FEI Number 65-0959282	Applied For Not Applicable	
Zip	Country	Zip	Country		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	i Agent	
		F /	Name	•	••		
SHERIF, MAHER EL 833 W. SAMPLE ROAD			Street	Street Address (P.O. Box Number is Not Acceptable)			
POM	IPANO BEACH FL 33064						
~			City	City FL Zip Code			
R The above	named entity submits this statement for	or the purpose of changing its r	egistered office	or registers	ed agent, or both, in the State of Florida.		
<b>0.</b> 1/10 above	Theritod ordery oddrings and oddrings a se	, old parpood of one ignig				,	
SIGNATURE .	Signature, typed or printed name of registered agent	and little if applicable. (NOTE:	Registered Agent sig	nature required	when resistating) i DATE		
9. This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so.  After MAY 1, 2000			0 Fee will be	\$550.00		\$5.00 May Be	
(See criter	ria on back)			ent of Stat		· ·	
11.			12.	. р.	ADDITIONS/CHANGES TO OFFICERS AN		
NAME	D Sherif, Maher el	☐ Delete	NAME -		RIF , MAHER EL	Change Addition 869	
STREET ADORESS	3781 N.W. 79TH AVENUE		STREET ADDRESS	s   318	INW.79th AVENUE	94 %	
CITY-ST-ZIP	CORAL SPRINGS FL 33065	·	CITY-ST-ZIP		RAL SPRINGS FL 33065		
TITLE NAME	O CUEDIE MONY MICTAES E	▼ Delete	TITLE NAME	0,0	ONNELL WILLIAMS	<u> </u>	
STREET ADDRESS	SHERIF, MOHY MUSTAFA E 3781 N.W. 79TH AVENUE		STREET ADDRESS	5 2	OF VILLAS LANTE 1 CARATON FL 33434	6%	
CITY-ST-ZIP	CORAL SPRINGS FL 33065		CITY-ST-ZIP	00.	CH KHIBN FC 33434		
TITLE	D	☐ Delete	TITLE	Ì		Change Addition	
NAME STREET ADDRESS	O'CONNELL, WILLIAM F 19906 VILLAS LANTE PLACE		NAME STREET ADDRES	s			
CITY-ST-ZIP	BOCA RATON FL 33434		CITY-ST-ZIP	1			
TITLE		☐ Delete	TITLE		يسريهم والمهور والمسترين و	Change Addition	
NAME			NAME CERCET ADDRESS	.			
STREET ADDRESS CITY-ST-ZIP			STREET ADDRESS	`		ļ ,	
TITLE		□ Delete	TITLE	+		☐ Change ☐ Addition	
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CITY-ST-ZIP		The Indian	TITLE	-	<u>.</u>	☐ Change ☐ Addition	
NAME TELLINE	Marine Marine Marine	Delete	NAME			, and other than the same of t	
STREET ADORESS	The state of the s		STREET ADDRESS	s		1" .	
CITY-ST-ZIP	3		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:

SIGNATURE AND TYPED OR PRINTED WHILE OF SIGNAMA OFFICER OR DIRECTOR