

2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P99000107236

1. Entity Name

PERSIAN PRINCESS UNIT 904, INC.

FILED
Mar 28, 2000 8:00 am
Secretary of State

03-28-2000 90081 041 ***150.00

Principal Place of Business

Mailing Address 1500 Ocean DR

~~500 SE MIAMI BLVD, PH7~~
~~BOCA RATON FL 33432~~

~~500 SE MIAMI BLVD, PH7~~
~~BOCA RATON FL 33432~~

1500 Ocean DR Suite 706
Miami South Beach, FL 33139

Suite 706
Miami South Beach, FL 33139

2. Principal Place of Business

3. Mailing Address

1500 Ocean Drive

1500 Ocean Drive

Suite, Apt. #, etc.

Suite, Apt. #, etc.

Suite 706

Suite 706

City & State

City & State

Miami South Beach, FL

Miami South Beach, FL

Zip

Country

Zip

Country

33139

33139

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

PIETRO, PERCI

Name

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

City

FL

Zip Code

1500 Ocean Drive
Suite 706
Miami South Beach, FL
33139

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 ☐ Delete
NAME **Secretary**
STREET ADDRESS **SHAKOORI, SHANAZ**
CITY-ST-ZIP **3131 South Ridge Dr.**
~~500 SE MIAMI BLVD, PH7~~
~~BOCA RATON FL 33432~~ **AKRON OH 44323**

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

TITLE ☐ Delete
NAME **President**
STREET ADDRESS **Perci Pietro**
CITY-ST-ZIP **1500 Ocean Drive, Suite 706**
Miami South Beach, FL 33139

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

TITLE ☐ Delete
NAME **Vice-President**
STREET ADDRESS **Jose Rafecas**
CITY-ST-ZIP **3131 South Ridge Dr.**
Akron, OH 44323

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

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

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

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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

3/8, 2000 (330) 666-8455
Date Daytime Phone #

CR2E034 (9/99)