

# 2001 UNIFORM BUSINESS REPORT (UBR)

**FILED**  
**Jan 26, 2001 8:00 am**  
**Secretary of State**  
 01-26-2001 90154 048 \*\*\*150.00

**DOCUMENT # V02240**

1. Entity Name

**S.G.M. ENGINEERING, INC.**

Principal Place of Business

**600 S. NORTH LAKE BLVD  
 SUITE 230  
 ALTAMONTE SPRINGS FL 32701  
 US**

Mailing Address

**600 S. NORTH LAKE BLVD  
 SUITE 230  
 ALTAMONTE SPRINGS FL 32701  
 US**

2. Principal Place of Business

**550 S. NORTH LAKE BLVD.  
 SUITE, Apt. #, etc. 1000**

3. Mailing Address

**550 S. Northlake Blvd.  
 SUITE, Apt. #, etc. 1000**

City & State

**Altamonte Springs, FL**

City & State

**Altamonte Springs, FL**

Zip

**32701**

Country

**Seminole**

Zip

**32701**

Country

**Seminole**

6. Name and Address of Current Registered Agent

**MALHOTRA, RABI  
 600 S. NORTH LAKE BLVD  
 SUITE 230  
 ALTAMONTE SPRINGS FL 32701**

7. Name and Address of New Registered Agent

Name **SHAHNAMI, GHULAM**  
 Street Address (P.O. Box Number is Not Acceptable)  
**550 S. NORTH LAKE BLVD.  
 Suite 1000**  
 City **Altamonte Springs** FL Zip Code **32701**

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 **GHULAM R. Shahnam, president** *[Signature]* **1/12/01**  
 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, 2001 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

TITLE NAME STREET ADDRESS CITY-ST-ZIP	VPT MALHOTRA, RABI 600 S. NORTH LAKE BLVD, SUITE 230 ALTAMONTE SPRINGS FL 32701	<input checked="" type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VPS GOYKHAM, VICTOR 600 S. NORTH LAKE BLVD, SUITE 230 ALTAMONTE SPRINGS FL 32701	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	P SHAHNAMI, GHULAM 600 S. NORTH LAKE BLVD, SUITE 230 ALTAMONTE SPRINGS FL 32701	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Delete

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	P, I SHAHNAMI, GHULAM 550 S. NORTH LAKE BLVD. # 1000 Altamonte Springs FL 32701	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Change <input type="checkbox"/> Addition

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]* **GHULAM R. Shahnam**  
 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

**407/767-5188**

CR2E034 (10/00)