

2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # **V65456**

1. Entity Name

A & S INTERNATIONAL RESOURCES, INC.

FILED

Jul 13, 2000 8:00 am
Secretary of State

07-13-2000 90267 022 ***400.00

06-23-2000 90106 039 ***150.00

Principal Place of Business

777 N.W. 72ND AVENUE
SUITE 2A-16
MIAMI FL 33126

Mailing Address

777 N.W. 72ND AVENUE
SUITE 2A-16
MIAMI FL 33126

2. Principal Place of Business

777 NW 72 AVE

Suite, Apt. #, etc.

2AA14

City & State

MIAMI FL

Zip

33126

Country

USA

3. Mailing Address

777 NW 72 AVE

Suite, Apt. #, etc.

2AA14

City & State

MIAMI FL

Zip

33126

Country

USA



DO NOT WRITE IN THIS SPACE

4. FEI Number

65-0358139

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

ABDELKHALEK, ABI
777 N.W. 72ND AVENUE
SUITE 2A-16
MIAMI FL 33126

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)

FILE NOW!!! FEE IS \$550.00
After SEPTEMBER 13, 2000 Min. will be \$750.00
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 **PTS** ☐ Delete
NAME **ABDELKHALEK, ABI**
STREET ADDRESS **777 NW 72ND AVE., STE. 2A16**
CITY-ST-ZIP **MIAMI FL**

TITLE **VTS** ☐ Delete
NAME **ABDELKALEK, ABI**
STREET ADDRESS **777 NW 72ND AVE., STE. SA16**
CITY-ST-ZIP **MIAMI FL**

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE **PTS** ☒ Change ☐ Addition
NAME **ABDELKHALEK, ABI**
STREET ADDRESS **777 NW 72 AVE. STE. 2AA14**
CITY-ST-ZIP **MIAMI FL 33126**

TITLE **VTS** ☒ Change ☐ Addition
NAME **ABDELKHALEK, ABI**
STREET ADDRESS **777 NW 72 AV. STE. 2AA14**
CITY-ST-ZIP **MIAMI FL 33126**

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

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

TITLE ☐ Change ☐ Addition
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 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 REQUIRED

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

07/08/00

305267722

Date

Daytime Phone #