

# 2001 UNIFORM BUSINESS REPORT (UBR)

**FILED**  
**Apr 02, 2001 8:00 am**  
**Secretary of State**

04-02-2001 90275 003 \*\*\*150.00

0523490

**DOCUMENT # V70958**

1. Entity Name

IMAN, INC.

Principal Place of Business

3118 GULF TO BAY BLVD  
324  
CLEARWATER FL 33759  
US

Mailing Address

3118 GULF TO BAY BLVD  
324  
CLEARWATER FL 33759  
US

818848



DO NOT WRITE IN THIS SPACE

2. Principal Place of Business

3118 GULF TO BAY BLVD  
Suite, Apt. #, etc.  
140

3. Mailing Address

3118 GULF TO BAY BLVD  
Suite, Apt. #, etc.  
140

City & State

CLEARWATER FL

City & State

CLEARWATER FL

4. FEI Number

59-3146337

Applied For

Not Applicable

Zip

33759

Country

USA

Zip

33759

Country

USA

5. Certificate of Status Desired

☐

\$8.75 Additional  
Fee Required

6. Name and Address of Current Registered Agent

KHADER, IBRAHIM  
3118 GULF TO BAY BLVD #324  
CLEARWATER FL 33759

7. Name and Address of New Registered Agent

Name  
KHADER, IBRAHIM  
Street Address (P.O. Box Number is Not Acceptable)  
3118 GULF TO BAY BLVD #140  
City  
CLEARWATER FL Zip Code  
33759

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 IBRAHIM KHADER

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

3-21-01

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  
PTD  
KHADER, IBRAHIM  
3118 GULF TO BAY BLVD #324  
CLEARWATER FL 33759 ☐ Delete

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
AT  
HMEIDAN, NAEL  
3118 GULF TO BAY BLVD, #324  
CLEARWATER FL 33759 ☒ Delete

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
☐ Delete

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
☐ Delete

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
☐ Delete

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
☐ Delete

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
PRES.  
IBRAHIM KHADER  
3118 GULF TO BAY BLVD #140  
CLEARWATER FL 33759 ☒ Change ☐ Addition

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

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

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

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

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
☐ Change ☐ 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 AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Pres.

3-21-01

Date

Daytime Phone #

(727) 7248292

CR2E034 (10/00)