2000 UNIFORM BUSINESS REPORT (UBR)

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SIGNATURE AND TYPED OR PRINTED NAME OF SIGN

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SIGNATURE:

FILED Jan 28, 2000 8:00 am Secretary of State **DOCUMENT # F83757** SUNCOAST G.J. ASSOCIATES, P.A. 01-28-2000 90161 024 ***150.00 Principal Place of Business Mailing Address 250 2ND STREET E. 250 2ND STREET E. SUITE 3E SUITE 3E 909377 **BRADENTON FL 34208-1042 BRADENTON FL 34208-1027** 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE Applied For City & State City & State 4. FEI Number 59-2190460 Not Applicable Country Country \$8.75 Additional Ζiρ 5. Certificate of Status Desired Fee Required 7. Name and Address of New Registered Agent 6. Name and Address of Current Registered Agent Name. REDDY, KAKUTURU L. Street Address (P.O. Box Number is Not Acceptable) 250 2ND STREET EAST SUITE 3E **BRADENTON FL 34208** Zip Code City FL 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 FILE NOW!!! FEE IS \$150.00 9. This corporation is eligible to satisfy its Intangible 10. Election Campaign Financing \$5.00 May Be Tax filing requirement and elects to do so. After MAY 1, 2000 Fee will be \$550.00 Trust Fund Contribution. Added to Fees (See criteria on back) Make Check Payable to Department of State ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 OFFICERS AND DIRECTORS 12. 11. ☐ Change Addition TITLE ☐ Delete TITLE REDDY, KAKUTURU L NAME NAME 250 2ND STREET EAST SUITE 3E STREET ADDRESS STREET ADDRESS CITY-ST-7IP BRADENTON, FL 00000 CITY-ST-ZIP ☐ Change ☐ Addition TITLE Delete TITLE DAWSON, MARK S. NAME NAME 250 2ND ST E STE 3E STREET ADDRESS STREET ADDRESS CITY-ST-ZIP BRADENTON FL CITY-ST-ZIP STD . □ Delete 및 _ ___ Change_ TITLE TITLE FAZZARY, MARIE NAME NAME STREET ADDRESS 250 2ND ST E STE 3E STREET ADDRESS CITY-ST-ZIP **BRADENTON FL** CITY-ST-ZIP ☐ Change ☐ Addition TITLE ☐ Delete TITLE SHASHIDHARA, MALERY NAME NAME 250 2ND STREET E. STREET ADDRESS STREET ADDRESS **BRADENTON FL 34208-1042** CITY-ST-ZIP CITY-ST-ZIP Delete Addition TITLE TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Change Addition ☐ Delete TITLE TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP 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 director exponenced to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 11 or Block 12 if chapted or on an attachment with brandfires, with all other like exponenced.