2003 FOR PROFIT CORPORATION

FILED Mar 26, 2003 8:00 am Secretary of State **UNIFORM BUSINESS REPORT (UBR)** G71234 DOCUMENT # 1. Entity Name 03-26-2003 90174 010 ***150.00 SAI INTERNATIONAL, INC. Principal Place of Business Mailing Address 4708 TANNERY AVE 4708 TANNERY AVE TAMPA FL 33824-4500 TAMPA FL 33624-4500 2. Principal Place of Business 3. Mailing Address SAI Inter 4708 Tann Are Suite, Apt. #, etc. Suite, Apt. #, etc. ☐ CHECK HERE IF MAKING CHANGES City & State City & State 4. FEI Number Applied For Dane as who 59-2376580 Zin Zin Not Applicable Country \$8.75 Additional 5. Certificate of Status Desired 362 3 Fee Required 7. Name and Address of New Registered Agent 6. Name and Address of Current Registered Agent CHAPNERKAR, V.D., DR. Street Address (P.O. Box Number is Not Acceptable) **4708 TANNERY AVE** TAMPA FL 33624 建立 City 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. I am familiar with, and accept the obligations of registered agen-SIGNATURE printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) FILE NOW!!! FEE IS \$150.00 9. Election Campaign Financing \$5.00 May Be After May 1, 2003 Fee will be \$550.00 Trust Fund Contribution. Added to Fees Make Check Payable to Florida Department of State 10. OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 11. TITI F ☐ Delete TITLE Change ☐ Addition CHAPNERKAR, VASANT D., DR. NAME NAME **4708 TANNERY AVE** STREET ADDRESS STREET ADDRESS **TAMPA FL 33624** CITY-ST-7IP CITY-ST-ZIP TITLE ☐ Delete TITLE ☐ Change ☐ Addition CHAPNERKAR, SUSHILA V.MRS NAME NAME 4708 TANNERY AVE STREET ADDRESS STREET ADDRESS TAMPA FL 33624 CITY-ST-ZIP CITY-ST-ZIP TITLE VΡ ☐, Delete TITLE . ____Change.____Addition. **BOYINGTON. D** NAME NAME STREET ADDRESS 1808 RIVERCHASE RD STREET ADDRESS CITY-ST-ZIP HIXSON TN 37343 CITY-ST-ZIP VΡ ☐ Delete TITLE ☐ Change Addition BOYINGTON, S NAME STREET ADDRESS 1808 RIVERCHASE RD STREET ADDRESS CITY-ST-7IP HIXSON TN 37343 CITY-ST-ZIP TITLE ☐ Delete TITLE ☐ Change Addition VAIDVA, A NAME NAME STREET ADDRESS 4414 TRAILWOODS DR STREET ADDRESS CITY-ST-ZIP SUGARLAND TX 77479 CITY-ST-ZIP Delete TITLE Addition CHAPNERKAR, L

12. I hereby certify that the information supplied with this filling 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

NAME

STREET ADDRESS

CITY-ST-7IP

4708 TANNERY AVE

TAMPA FL 33624

NAME

STREET ADDRESS

CITY-ST-ZIP