2002 UNIFORM BUSINESS REPORT (UBR)									
DOCUI 1. Entity Nami RESA, IN		J1659	8				03 AUG'11' AH' 9: 11		
Principal Place 6350 INDIAN ' #5 JUPITER FL 3	TOWN RD	~	Mailing Address 18854 BIG CYPRESS DR. JUPITER PL 33458 US			e	SECRETARY OF STATE SECRETARY OF STATE TALLAHASSEE, FLORIDA		
<u> </u>	ace of Business		3. Mailing Address 555 Rooke Ry Pl Suite, Apt. #, etc.			ρ		BIBBI DIDHI BIRLI BALLI BALLI BARI FARA	
Suite, Apt			City & State				4. FEI Number 59-2736495	Applied For	
Zip /	Co	untry	Jupiter 33458	Cour	ntry		5. Certificate of Status Desired	\$8.75 Additional Fee Required	
1211 THE	, JAMES M.	Address of Current F	egistered Agent		Name Street Ar	Street Address (P.O. Box Number is Not Acceptable)			
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									
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DPT PATEL, BHUPE 555 ROOKERY JUPITER FL 33	PL.	DIRECTORS Delete		.E		ADDITIONS/CHANGES TO OFFICERS	Change Addition	
NAME STREET ACORESS CITY-ST-ZIP	DVPS PATEL, ALKA 555 ROOKERY JUPITER FL 33		□ Delete -				10002220 08/11/0301034	기요무염에 □ Addition -005 **300.00	
NAME STREET ADDRESS CITY-ST-ZIPHES	7		_	NAN STR	E ME EE1 ADDRESS Y-S1-ZIP			Change Addition.	
NAME TABLES STREET ACCRESS CITY-ST-ZIP	10		Delete					☐ Change ☐ Addition	
TITLE MAME	S OU DECRY	i Begara wa Li	Delete	Ty. STA	E AE EET ADDRESS Y:ST-ZIP		These thines Cheb Notion. Also introductors of \$250 to 500 (3)	Change Daddition	
TITLE JONES NAME STRLET ADDRESS CITY-ST-ZIP	Constant of the second	A defythe letterged is	Delete		100	And one of	And the section of th	☐ Chánge ☐ Addition	
13. I hereby certify that the information supplied with this fiting 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 Date On Oxyding Phone #									

2/ 0/17

RESA, INC. 555 Rookery Place 🛶 Jupiter, Fl. 33458

***** INVOICE ******

Invoice Number: 000004

Invoice Date: 07/22/03

Page: 1

Sold FLORIDA DEPT OF STATE To: DIVISIONS OF CORPORATIONS P.O. BOX 6327 TALLAHASSEE, FLORIDA 32314

Ship FLORIDA DEPT OF STATE To: DIVISIONS OF CORPORATIONS P.O. BOX 6327 TALLAHASSEE, FLORIDA 32314

Ship Via.: Ship Date: 07/22/03 Cust I.D....: FLORID

Item I.D./Desc.

Shipped Unit Price

Net TX

DEAR SIR:

PER OUR CONVERSATION THIS DATE, WE ARE REQUESTING YOU TO NOT CHARGE US FOR THE LATE FEE:

WE FILED A FORM WITH YOU, FOR 2002 WE FILED A FORM WITH YOU, FOR 2003 YOU REJECTED THE FORM ON MAY 12TH, 2003 AND FORWARDED A LETTER WHICH REQUIRED A RETURN WITHIN 60 DAYS. WE NEVER RECEIVED THIS.

OUR ADDRESS CHANGED, SUMMER OF 2001. YOUR LETTER WAS NOT RETURNED TO YOU, NOR HAVE WE RECEIVED IT.

HOWEVER, YOU DID CHANGE THE OFFICERS ADDRESS, - BUT NOT THE MAILING ADDRESS. ENCLOSED YOU WILL FIND PAYMENT TO CORRECT THE AMOUNTS DUE. PLEASE CORRECT OUR ADDRESS.

Bhurendu-P-Patil BHUPENDRA P. PATEL

> Subtotal: 0.00 Tax...: 0.00 Payments: 0.00 Total...: 0.00

555 Rooker Jupiter, F1. 33458:

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Invoice Date: 07/22/03

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BHÓPENDRA P. PATEL

100022208781 08/11/03--01034--005 **300.00

Subtotal: 0.00 0.00 Tax...: Payments: 0.00 Total...: 0.00