FILED
Jun 09, 2003 8:00 am
Secretary of State
05-05-2003 91158 033 ***150.00

5.

FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P02000040105

1. Entity Name

SUJOY CORP.

DO NOT WRITE IN THIS SPACE

[redacted] 55046863

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business	3. Mailing Address
1901 HARRISON ST.	1901 HARRISON ST.
Suite, Apt. #, etc. #7	Suite, Apt. #, etc. #7
City & State HOLLYWOOD, FL	City & State HOLLYWOOD, FL
Zip 33020 Country USA	Zip 33020 Country USA

4. FEI Number 02-0591189 ☐ Applied For ☐ Not Applicable

5. Certificate of Status Desired ☐ **$8.75** Additional Fee Required

DO NOT WRITE IN THIS SPACE

7. Name and Address of Current Registered Agent

Name IVAN SUJOY

Street Address (P.O. Box Number is Not Acceptable) 1901 HARRISON ST

City HOLLYWOOD FL Zip Code 33020

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 agent.

SIGNATURE IVAN SUJOY 06/04/2003

Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) DATE

January 1 - May 1 Fee is $150.00
After May 1 Fee is $550.00
Amended UBR is $61.25
Make Check Payable to Florida Department of State

9. Election Campaign Financing Trust Fund Contribution. ☐ **$5.00** May Be Added to Fees

10. OFFICERS AND DIRECTORS

TITLE	P
NAME	SUJOY, MARIO
STREET ADDRESS	2501 NE 48 ST.
CITY-ST-ZIP	LIGHTHOUSE POINT, FL 33064
TITLE	V
NAME	SUJOY, CRISTINA
STREET ADDRESS	2501 NE 48 ST.
CITY-ST-ZIP	LIGHTHOUSE POINT, FL 33064
TITLE	D
NAME	SUJOY, IVAN
STREET ADDRESS	2501 NE 48 ST.
CITY-ST-ZIP	LIGHTHOUSE POINT, FL 33064
TITLE	
NAME	
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CR2E034B (12/02)

12. 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 10 or on an attachment with an address, with all other like empowered.

SIGNATURE: IVAN SUJOY 4/29/03

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Title Daytime Phone #