

2000 UNIFORM BUSINESS REPORT (UBR)

FILED

Apr 11, 2000 08:00 AM
Secretary of State

DOCUMENT # P99000027533

1. Entity Name
 SITARA GROUP, INC.

Principal Place of Business 1235 COVE LAKE RD. NORTH LAUDERDALE FL 33068	Mailing Address 1235 COVE LAKE RD. NORTH LAUDERDALE FL 33068
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2. Principal Place of Business 595 LAKE VIEW DR Suite, Apt. #, etc.	3. Mailing Address 595 LAKE VIEW DRIVE Suite, Apt. #, etc.
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City & State CORAL SPRINGS FL	City & State CORAL SPRINGS FL
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Zip 33071	Country	Zip 33071	Country
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4. FEI Number 65-0921630	Applied For <input type="checkbox"/> Not Applicable
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5. Certificate of Status Desired **\$8.75** Additional Fee Required

DO NOT WRITE IN THIS SPACE

6. Name and Address of Current Registered Agent

BASHIR ADNAN
 1235 COVE LAKE RD.
 NORTH LAUDERDALE FL 33068

7. Name and Address of New Registered Agent

Name BASHIR ADNAN	Street Address (P.O. Box Number is Not Acceptable) 595 LAKE VIEW DRIVE
City CORAL SPRINGS	FL Zip Code 33071

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 _____ DATE **04/11/2000**
Signature, typed or printed name of registered agent and title if applicable (NOTE Registered Agent signature required when reinstating)

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, 2000 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	PD <input type="checkbox"/> Delete
NAME	BASHIR ADNAN
STREET ADDRESS	1235 COVE LAKE RD.
CITY-ST-ZIP	NORTH LAUDERDALE FL 33068
TITLE	<input type="checkbox"/> Delete
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	<input type="checkbox"/> Delete
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	<input type="checkbox"/> Delete
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	<input type="checkbox"/> Delete
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE	PD <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	BASHIR ADNAN
STREET ADDRESS	595 LAKE VIEW DRIVE
CITY-ST-ZIP	CORAL SPRINGS FL 33071
TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	
STREET ADDRESS	
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 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: ADNAN BASHIR

DATE: 04/11/2000