

# 2000 UNIFORM BUSINESS REPORT (UBR)

**FILED**  
**Apr 18, 2000 8:00 am**  
**Secretary of State**

04-18-2000 90232 035 \*\*\*150.00

**DOCUMENT # P97000106950**

1. Entity Name  
**PRAVIRAJ, INC.**

Principal Place of Business

Mailing Address

2275 ALOMA AVENUE  
 WINTER PARK FL 32792

2275 ALOMA AVENUE  
 WINTER PARK FL 32792-3303

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number

**59-3481963**

Applied For

Not Applicable

5. Certificate of Status Desired

**\$8.75** Additional Fee Required



DO NOT WRITE IN THIS SPACE

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

**BALLETTO, VINCENT D**  
**3956 TOWN CENTER BLVD. #165**  
**ORLANDO FL 32837**

Name

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

City

**FL**

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.

SIGNATURE \_\_\_\_\_ DATE \_\_\_\_\_  
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

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE NAME  Delete  
**V**  
**PANKHANIA, VIBHAVARI**  
 STREET ADDRESS **121 BENT OAK LOOP**  
 CITY-ST-ZIP **DAVENPORT FL 33837**

TITLE NAME  Change  Addition  
**VIT**  
 STREET ADDRESS **630 GLENARDEN RD.**  
 CITY-ST-ZIP **WINTER PARK, FL 32792**

TITLE NAME  Delete  
**P**  
**PANKHANIA, PRAVIN G**  
 STREET ADDRESS **121 BENT OAK LOOP**  
 CITY-ST-ZIP **DAVENPORT FL 33837**

TITLE NAME  Change  Addition  
 STREET ADDRESS **630 GLENARDEN RD**  
 CITY-ST-ZIP **WINTER PARK, FL 32792**

TITLE NAME  Delete  
 STREET ADDRESS  
 CITY-ST-ZIP

TITLE NAME  Change  Addition  
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 CITY-ST-ZIP

TITLE NAME  Change  Addition  
 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: *Vibhavari Pankhania*  
 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

April 12<sup>th</sup> 2000  
 Date

407 657 9274  
 Daytime Phone #