

2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

FILED
Feb 17, 2003 8:00 am
Secretary of State

02-17-2003 90257 009 ***150.00

0090392 AV

DOCUMENT # P97000106950

1. Entity Name
PRAVIRAJ, INC.



Principal Place of Business
2275 ALOMA AVENUE
WINTER PARK FL 32792

Mailing Address
2275 ALOMA AVENUE
WINTER PARK FL 32792

10001000



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

CHECK HERE IF MAKING CHANGES

6. Name and Address of Current Registered Agent

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

7. Name and Address of New Registered Agent

Name
Vibha Pankhania
Street Address (P.O. Box Number is Not Acceptable)
630 Glen Arden Road
City Winter Park FL Zip Code 32792

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

Signature, typed or printed name of registered agent and title if applicable.

VIBHAVARI P PANKHANIA

(NOTE: Registered Agent signature required when reinstating)

14th Feb 03

DATE

FILE NOW!!! FEE IS \$150.00

After May 1, 2003 Fee will be \$550.00

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

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
V
PANKHANIA, VIBHAVARI
630 GLENARDEN RD
WINTER PARK FL 32792 Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
 Change Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
P
PANKHANIA, PRAVIN G
630 GLENARDEN RD
WINTER PARK FL 32792 Delete

TITLE
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CITY-ST-ZIP
 Change Addition

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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 Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: VIBHAVARI P PANKHANIA

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

14th Feb '03

DATE

407 657 9274

Daytime Phone #

CR2E034 (10/02)