

**2024 FLORIDA PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P03000077294

**Entity Name:** STUTI, INC

**Current Principal Place of Business:**

9542 ARGYLE FOREST BLVD  
C17  
JACKSONVILLE, FL 32222

**Current Mailing Address:**

9542 ARGLYE FOREST BLVD  
C17  
JACKSONVILLE, FL 32222

**FEI Number:** 20-0090426

**Certificate of Status Desired:** No

**Name and Address of Current Registered Agent:**

PATEL, ATUL  
450-106 SR 13 N  
BOX 238  
ST JOHNS, FL 32259 US

*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:**

\_\_\_\_\_  
Electronic Signature of Registered Agent

\_\_\_\_\_  
Date

**Officer/Director Detail :**

Title P  
Name PATEL, VIJAY D  
Address 9542 ARGYLE FOREST BLVD #C17  
City-State-Zip: JACKSONVILLE FL 32222

Title VP  
Name MOTIWALA, BHADRESH  
Address 9542 ARGYLE FOREST BLVD #C17  
City-State-Zip: JACKSONVILLE FL 32222

Title S  
Name AMIN, RINKU  
Address 9542 ARGYLE FOREST BLVD #C17  
City-State-Zip: JACKSONVILLE FL 32222

Title T  
Name PATEL, DINESH  
Address 9542 ARGYLE FOREST BLVD #C17  
City-State-Zip: JACKSONVILLE FL 32222

*I hereby certify that the information indicated on this report or supplemental report is true and accurate and that my electronic 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 above, or on an attachment with all other like empowered.*

**SIGNATURE:** VIJAY PATEL

**PRESIDENT**

**04/16/2024**

\_\_\_\_\_  
Electronic Signature of Signing Officer/Director Detail

\_\_\_\_\_  
Date