

2014 FLORIDA PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P13000061188

Entity Name: SUFII DAY SPA CORPORATION

Current Principal Place of Business:

9439 FOREST CITY COVE
SUITE 1050
ALTAMONTE SPRINGS, FL 32714

Current Mailing Address:

9439 FOREST CITY COVE
SUITE 1050
ALTAMONTE SPRINGS, FL 32714 US

FEI Number: 46-3268908

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

DESAI, TUSHAAR
1540 LAKE BALDWIN LANE
SUITE B
ORLANDO, FL 32814 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 SHIVARANI, SARAH
Address 9439 FOREST CITY COVE, SUITE 1050
City-State-Zip: ALTAMONTE SPRINGS FL 32714

Title VP
Name SHARIFI, GITA
Address 9439 FOREST CITY COVE, SUITE 1050
City-State-Zip: ALTAMONTE SPRINGS FL 32714

Title O
Name SHIVARANI, BABACK
Address 9439 FOREST CITY COVE, SUITE 1050
City-State-Zip: ALTAMONTE SPRINGS FL 32714

Title O
Name DESAI, TUSHAAR
Address 1540 LAKE BALDWIN LANE, SUITE B
City-State-Zip: ORLANDO FL 32814

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: TUSHAAR DESAI, ESQ.

O

01/24/2014

Electronic Signature of Signing Officer/Director Detail

Date