2001 UNIFORM BUSINESS ...

192

DOCUMENT # A96000000141

1. Entity Name

SNVN HOLDINGS, LTD.

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
01 JUL -3 AM 10:36

DO NOT WRITE IN THIS SPACE

Principal Place of Business	Mailing Address
9475 SW 69TH AVE. MIAMI FL 33156	9475 SW 69TH AVE. MIAMI FL 33156

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 65-0801863 ☐ Applied For ☐ Not Applicable

5. Certificate of Status Desired ☐ **$8.75** Additional Fee Required

6. Name and Address of Current Registered Agent

KRAMER, ROBERT M
C/O KRAMER, GREEN, ET AL
4000 HOLLYWOOD BLVD., SUITE 485 SO.
HOLLYWOOD FL 33021

7. Name and Address of New Registered Agent

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. Capital Contributions as Shown on record. **$51,250.00**

10. Amount of Capital Contributions in FLORIDA to date.

11. MAKE CHECK PAYABLE TO DEPT. OF STATE. SEE REVERSE SIDE FOR FEE INFORMATION

A GENERAL PARTNER THAT IS A BUSINESS ENTITY MUST BE REGISTERED AND ACTIVE WITH THIS OFFICE.
NOTE: General Partners MAY NOT be changed on the form; an amendment must be filed to change a general partner.

12. GENERAL PARTNER INFORMATION		13. ADDRESS CHANGES ONLY	
DOCUMENT #		STREET ADDRESS	
NAME	VORASARAN, SUVIMOL		
STREET ADDRESS	9475 S.W. 69TH AVENUE	CITY-ST-ZIP	FF $447.50
CITY-ST-ZIP	MIAMI FL 33156		
DOCUMENT #		STREET ADDRESS	900004474609--8
NAME		CITY-ST-ZIP	-07/13/01--01050--026 ****447.50 ****447.50
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NAME		CITY-ST-ZIP	
STREET ADDRESS			
CITY-ST-ZIP			

14. *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 is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am a General Partner of the limited partnership or the receiver or trustee empowered to execute this report as required by Chapter 620, Florida Statutes*

SIGNATURE: Suvimol Vorasaran 4/15/01 (305) 663-9143
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING GENERAL PARTNER — Date — Daytime Phone #
SUVIMOL VORASARAN

June 1, 2001

To whom it may concern;

This letter is regarding the 2001 Uniform Business Report. On April 15, 2001 I sent a check of $358.75 along with the annual form. The reason I am writing is because now it is June 1, 2001, and the check has not yet cleared the bank. We are worried you did not received the check and our report. (Please see the enclosed copy of the form and the check.)

If you did not received the check and the report, Please send me another copy of the form so that we can file it again. Thank you very much.

Sincerely,

Suvimol Vorasaran

SUVIMOL VORASARAN
(305) 663-9143