

FILED
May 05, 2003 8:00 am
Secretary of State

05-05-2003 91882 014 ***150.00

FOR PROFIT CORPORATION
UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # F01000006489			
1. Entity Name RELIQ INC.			
DO NOT WRITE IN THIS SPACE			
2. Principal Place of Business 1466 BROADWAY, SUITE 1610 Suite, Apt. #, etc.		3. Mailing Address Suite, Apt. #, etc.	
City & State NEW YORK, NY		City & State	
Zip 10036	Country	Zip	Country
4. FEI Number 13-3938090		Applied For <input checked="" type="checkbox"/> Not Applicable	
5. Certificate of Status Desired <input type="checkbox"/>		\$8.75 Additional Fee Required	
DO NOT WRITE IN THIS SPACE			
7. Name and Address of Current Registered Agent			
- Name KARAN KAPUR			
Street Address (P.O. Box Number is Not Acceptable) 300 NE 75 TH STREET			
City MIAMI		FL	Zip Code 33138
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 <i>KARAN KAPUR</i>		DATE 4/28/2003	
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)			
January 1 - May 1 Fee is \$150.00 After May 1, Fee is \$550.00 Amended UBR is \$81.25 Make Check Payable to Florida Department of State		9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees	
10. OFFICERS AND DIRECTORS			
TITLE NAME STREET ADDRESS CITY-ST-ZIP		11.	
PRESIDENT KARAN KAPUR 300 NE 75 TH STREET MIAMI, FL 33138		TITLE NAME STREET ADDRESS CITY-ST-ZIP	
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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 on an attachment with an address, with all other like empowered.			
SIGNATURE: <i>KARAN KAPUR</i>		PRESIDENT	
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR		Date	Daytime Phone #
		4/28/2003	(305) 7540408 x 11