

2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # F58516

1. Entity Name

SUSHILA, INC.

FILED
Jan 25, 2000 8:00 am
Secretary of State

01-25-2000 90115 024 ***150.00

Principal Place of Business
COMMERCE BLVD US90 4 175
PO BOX 2156
LAKE CITY FL 32056

Mailing Address
COMMERCE BLVD US90 4 175
PO BOX 2156
LAKE CITY FL 32056-2156

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 59-2143833

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

CROUCH (T. ALLEN)
113 NORTHEAST 16TH AVENUE
GAINESVILLE FL 32601

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

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

(NOTE: Registered Agent signature required when reinstating)

DATE

9. This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so. (See criteria on back) ☒

FILE NOW!!! FEE IS \$150.00
After MAY 1, 2000 Fee will be \$550.00
Make Check Payable to Department of State

10. Election Campaign Financing Trust Fund Contribution. ☐

\$5.00 May Be Added to Fees

11. OFFICERS AND DIRECTORS

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
V
PATEL, NALIN R
RT 13, BOX 1135
LAKE CITY, FL 00000 ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☒ Change ☐ Addition
720 SOUTH LAKE PRAIRIE DRIVE
WACO, TX 76704

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
P
PATEL, SURYAKANT R
ROUTE 13 BOX 1224
LAKE CITY, FL 00000 ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☒ Change ☐ Addition
2255 SE 55TH COURT
OCALA, FL 34471

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
ST
PATEL, INDU P
15311 KWANZAN CT
GAINESVILLE, FL 00000 ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☒ Change ☐ Addition
15311 KWANZAN COURT
NORTH POTOMAC, MD 20878

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
V
PATEL, ANIL D
3455 SE 58TH AVE
OCALA FL ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Change ☐ Addition

13. 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 11 or Block 12 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

anil d patel
REQUIRED

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

1-15-00 352 624 9530

Date

Daytime Phone #