

2000 UNIFORM BUSINESS REPORT (UBR)

1052

DOCUMENT # 1470227

1. Entity Name

PARITA INC

W-20503

09-11-2000 90005 036 ***450.00

FILED

H76227

SECRETARY OF STATE
DIVISION OF CORPORATION

00 SEP 18 PM 12:00

A0075865

98-00 UBR

Principal Place of Business
905 W Canal ST
MULBERRY
FLORIDA 33860

Mailing Address
1548 BAMBURY LOOP
LAKELAND FL
33809

2. Principal Place of Business
MULBERRY

3. Mailing Address
1548 BAMBURY LOOP

City & State
MULBERRY FL

City & State
LAKELAND FL

4. FEI Number
59-2586056

5. Certificate Status Desired ☐ \$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent
RAJNIKANT K. PATEL
1548 BAMBURY LOOP
LAKELAND FL 33809

7. Name and Address of New Registered Agent
Name
NONE
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] 8.8.2000
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)

10. Election Campaign Financing
Trust Fund Contribution ☐ \$5.00 May Be Added to Fees

11. OFFICERS AND DIRECTORS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PRESIDENT RAJNIKANT K. PATEL 1548 BAMBURY LOOP LAKELAND FL 33809 ☐ Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Delete

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition
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 empowerment.

SIGNATURE: RAJNIKANT K. PATEL 8.8.2000 865-425-5168
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

CR20034 (9/99)

9/11

Attachment
H 76227

A0075805

2082

PARITA INC

Business Address 905 W. Canal ST
Mulberry FL 33860
8:9:00

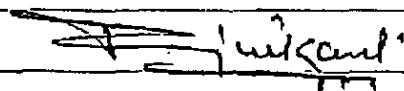
Dept of State

Reinstatement:
ATTENTION Michelle

Please find Enclosed
form filled by me for Reinstatement.
I never got the Renewal forms as
I moved my Resident (SOTC) ~~the~~ another
address 1548 Bambury Loop FL 33860
The mail Post office who
had my forwarding address, did
forward the mail for few months
~~and~~ and then they stopped.

I am sorry for this mix up
If I did not move this wouldn't
happen.

Also find Enclosed CK for 450.00
for Reinstatement as per our tel. conversation
of 7:31:00
Thank you

 J. J. J. J. J.