

# 2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT #

1. Entity Name

P  
P & G Service Station

Principal Place of Business  
3091 N.W. 19th St  
Ft. Laud. FL 33311

Mailing Address  
3091 N.W. 19th St  
Ft. Laud. FL 33311

5.  
**FILED**  
**Jun 03, 2000 8:00 am**  
**Secretary of State**

05-05-2000 90082 009 \*\*\*150.00

305020

2. Principal Place of Business  
3091 N.W. 19th St  
Suite, Apt. #, etc.

3. Mailing Address  
3091 N.W. 19th ST  
Suite, Apt. #, etc.

DO NOT WRITE IN THIS SPACE

City & State  
Ft. Laud. FL  
Zip  
33311  
Country  
USA

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Ft. Laud. FL  
Zip  
33311  
Country  
USA

4. FEI Number  
59-2718732  
Applied For  
Not Applicable  
5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

Kurland and Kurland  
2853 Pines Blvd  
Embroke Pines, FL 33024  
(954) 436-6080

7. Name and Address of New Registered Agent

Name  
Street Address (P.O. Box Number is Not Acceptable)  
City  
FL Zip Code

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

P  
Tateram Bachan  
1991 NW 14th Ave  
Ft. Laud. FL 33311  
Delete ☐  
V  
Ramaesh Bachan  
1991 NW 14th Ave.  
Ft. Laud. FL 33311  
Delete ☐  
S  
Goomtie Bachan  
1991 NW 14th Ave  
Ft. Laud. FL 33311  
Delete ☐  
Delete ☐  
Delete ☐  
Delete ☐  
Delete ☐

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

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

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: Tateram Bachan  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4-20-00 (954) 484-8240  
Date Daytime Phone #

CR2E034 (9/99)