

2001 UNIFORM BUSINESS REPORT (UBR)

FILED

Feb 15, 2001 8:00 am
Secretary of State

02-15-2001 90005 019 ***150.00

DOCUMENT # K91804

1. Entity Name
CANO & HARRY CORPORATION, INC.

Principal Place of Business

2712 FAIRMOUNT DR.
SEBRING FL 33870

3750 U.S. 27 HWY NORTH.
UNIT C1 - SEBRING FL 33870

Mailing Address

2712 FAIRMOUNT DR.-
SEBRING FL 33870

3750, U.S. 27 HWY NORTH.
UNIT C1. SEBRING FL 33870

2. Principal Place of Business

3750 U.S. 27 HWY NORTH.

Suite, Apt. #, etc.
UNIT C1

City & State
SEBRING, FLORIDA

Zip
33870

Country
HIGHLAND

3. Mailing Address

3750, U.S. 27 HWY NORTH

Suite, Apt. #, etc.
UNIT C1

City & State
SEBRING, FLORIDA

Zip
33870

Country
HIGHLAND.



DO NOT WRITE IN THIS SPACE

4. FEI Number 59-2951104

☒ 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

PATIDAR, HARI GOPAL
2712 FAIRMOUNT DR.
SEBRING FL 33870

PATIDAR HARI GOPAL
3750, U.S. 27 HWY NORTH
UNIT C1.
SEBRING FL 33870

Name PATIDAR HARI GOPAL

Street Address (P.O. Box Number is Not Acceptable)
3750, U.S. 27 HWY NORTH.

Unit C1

City SEBRING

FL

Zip Code 33870

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, 2001 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 PD
NAME PATIDAR, HARI GOPAL
STREET ADDRESS 2712 FAIRMOUNT DR.
CITY-ST-ZIP SEBRING FL 33870 ☐ Delete

TITLE PD
NAME PATIDAR HARI GOPAL
STREET ADDRESS 3750 U.S. 27 HWY NORTH.
CITY-ST-ZIP UNIT C1 SEBRING FL 33870 ☒ Change ☐ Addition

TITLE VDST
NAME PATEL, MINAXIBEN HARVADAN
STREET ADDRESS 2712 FAIRMOUNT DR.
CITY-ST-ZIP SEBRING FL 33870 ☐ Delete

TITLE VDST
NAME PATEL MINAXIBEN HARVADAN
STREET ADDRESS 3750 U.S. 27 HWY NORTH.
CITY-ST-ZIP UNIT C1 SEBRING FL 33870 ☒ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Delete

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

TITLE
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STREET ADDRESS
CITY-ST-ZIP ☐ Delete

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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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR (PRESIDENT)

2.12.2001 (863) 471-2277

Date Daytime Phone #

CR2E034 (10/00)