

2001 UNIFORM BUSINESS REPORT (UBR)

0022723 AF

DOCUMENT # L00000003020

1. Entity Name
SANJAY ENTERPRISES, LLC

Principal Place of Business
10091 CORTEZ BLVD.
BROOKSVILLE FL 34613

Mailing Address
10091 CORTEZ BLVD.
BROOKSVILLE FL 34613

2. Principal Place of Business
Suite, Apt. #, etc.:

3. Mailing Address
Suite, Apt. #, etc.:

City & State

City & State

4. FEI Number **59-3634265**

5. Certificate of Status Desired **\$5.00 Additional Fee Required**

FILED
01 MAY 29 PM 3:53
SECRETARY OF STATE
TALLAHASSEE, FLORIDA



DO NOT WRITE IN THIS SPACE

6. Name and Address of Current Registered Agent
NAPOLITANO, PETER A
7617 LITTLE ROAD
NEW PORT RICHEY FL 34654

7. Name and Address of New Registered Agent

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 _____ DATE _____
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

FILE NOW!!! FEE IS \$50.00
Make Check Payable to Department of State

| 9. MANAGING MEMBERS / MEMBERS | | 10. ADDITIONS / CHANGES | |
|--|--|--|---|
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | GENERAL MANAGER JAY P. KUMAR 10123 FAIRCHILD ROAD SPRING HILL, FL 34608 | TITLE NAME STREET ADDRESS CITY-ST-ZIP | <input type="checkbox"/> Change <input type="checkbox"/> Addition |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | MEMBER C. PURUSHOTHAMAN 14425 STERLING RUN BROOKSVILLE, FL 34613 | TITLE NAME STREET ADDRESS CITY-ST-ZIP | <input type="checkbox"/> Change <input type="checkbox"/> Addition |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | <input type="checkbox"/> Delete | TITLE NAME STREET ADDRESS CITY-ST-ZIP | <input type="checkbox"/> Change <input type="checkbox"/> Addition |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | <input type="checkbox"/> Delete | TITLE NAME STREET ADDRESS CITY-ST-ZIP | <input type="checkbox"/> Change <input type="checkbox"/> Addition |
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*****55.00 *****55.00

11. 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 is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 608, Florida Statutes.

SIGNATURE: **JAY P. KUMAR, C/M** 4/4/01 352-597-6600

CR2E083 (11/00)