

2000 UNIFORM BUSINESS REPORT (UBR)DOCUMENT # **L59985**

1. Entity Name

MAHARISHI VEDA LAND CORPORATION ✓**FILED**
Aug 21, 2000 8:00 am
Secretary of State

08-21-2000 90212 027 ***550.00

Principal Place of Business

MARKT 1
A.C. VLODROP
6063 NETHERLANDS
OC

Mailing Address

MARKT 1
A.C. VLODROP
6063 NETHERLANDS
OC

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

59-3070186

Applied For

Not Applicable

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

6. Name and Address of Current Registered Agent

GOROVITZ, AARON J
215 N. EOLA DRIVE
ORLANDO FL 32801

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

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 \$550.00**
After SEPTEMBER 13, 2000 Min. will be \$750.00
Make Check Payable to Department of State10. Election Campaign Financing
Trust Fund Contribution. ☐**\$5.00** May Be
Added to Fees

11. OFFICERS AND DIRECTORS

TITLE	C	<input checked="" type="checkbox"/> Delete
NAME	HENNING, DOUG	
STREET ADDRESS	330 BAY STREET STE. 1306	
CITY-ST-ZIP	TORONTO ONTARIO CANADA M5H2S-8	

TITLE	D	<input type="checkbox"/> Delete
NAME	PATERSON, NEIL	
STREET ADDRESS	MARKT 1	
CITY-ST-ZIP	VLODROP NE	

TITLE	D	<input type="checkbox"/> Delete
NAME	UIJEN, JACQUES	
STREET ADDRESS	MARKT 1	
CITY-ST-ZIP	VLODROP NE	

TITLE	D	<input type="checkbox"/> Delete
NAME	HAMZA, OMAR	
STREET ADDRESS	34 HOLLAND VILLAS RD.	
CITY-ST-ZIP	LONDON W148DH ENGLAN	

TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
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STREET ADDRESS		
CITY-ST-ZIP		

TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
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CITY-ST-ZIP		

TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

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 REQUIRED
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR**J. A. H. Uijen****03-08-2000** **31-495-536374**
Date Daytime Phone #

CR2E034 (5/00)

**LOWNDES
DROSDICK
DOSTER
KANTOR &
REED, P.A.**

Attorneys at Law

Attachment 2 59985 *DOUG 00 18*
**215 NORTH EOLA DRIVE
ORLANDO, FLORIDA 32801**

**450 SOUTH ORANGE AVENUE, SUITE 800
ORLANDO, FLORIDA 32801**

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www.lowndes-law.com

GAIL S. ANDRE'

North Eola Drive Office

Direct Dial: (407) 418-6203

E-mail: gail.andre@lowndes-law.com

August 15, 2000

CERTIFIED MAIL 7099 3220 0009 4404 0199

RETURN RECEIPT REQUESTED

Registration Section

Division of Corporations

P.O. Box 6327

Tallahassee, Florida 32314-6327

Re: 2000 Uniform Business Report

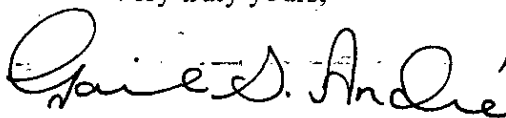
Dear Madam or Sir:

Enclosed is the 2000 Uniform Business Report for the corporation listed below, together with our client's check in the amount of \$550.00 payable to the Department of State representing the filing fee and penalty fee:

MAHARISHI VEDA LAND CORPORATION

Please file the report upon receipt of same. Thank you for your assistance in this matter.

Very truly yours,



Gail S. Andre'

Legal Assistant to

Aaron J. Gorovitz

GSA

Enclosures

038116/49975/367548

c: Mr. Aaron J. Gorovitz, Esquire