2000 UNIFORM BUSINESS REPORT (UBR) Jan 19, 2000 8:00 am Secretary of State **DOCUMENT # L64880** 1. Entity Name -SUNBRITE, INC. 01-19-2000 90183 005 ***150.00 Mailing Address Principal Place of Business 644 67TH ST CIRCLE EAST 644 67TH ST CIRCLE EAST **BRADENTON FL 34208-6087 BRADENTON FL 34208** 0 U 3 Z Y O 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE Applied For 4. FEI Number 'City & State City & State 65-0188224 Not Applicable \$8.75. Additional. Zip Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Name SHAH, PRAKASH J. Street Address (P.O. Box Number is Not Acceptable) 644 67TH ST CIRCLE EAST **BRADENTON FL 34208** 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. DATE (NOTE: Registered Agent signature required when reinstating) FILE NOW!!! FEE IS \$150.00 9. This corporation is eligible to satisfy its Intangible 10. Election Campaign Financing \$5.00 May Be Tax filing requirement and elects to do so. After MAY 1, 2000 Fee will be \$550.00 Trust Fund Contribution. Added to Fees (See criteria on back) Make Check Payable to Department of State ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 OFFICERS AND DIRECTORS 11. ☐ Change Addition ☐ Delete TITLE TITLE PATEL, NATVER G NAME NAME STREET ADDRESS STREET ADDRESS 441 BROAD STREET CITY-ST-7P CITY,-ST-ZIP AUGUSTA GA Delete .. Change . Addition TITLÈ TITLE NAME SHAH, P.J. NAME 644 67TH ST CIRCLE EAST STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP BRADENTON FL TITLĖ ☐ Delete TITLE ☐ Change Addition NAME PATEL, KANUBHAD D. NAME STREET ADDRESS 7645 WILLIAMSON ROAD STREET ADDRESS CITY-ST-ZIP ROANOKE VA CITY-ST-ZIP ☐ Delete ☐ Change Addition TITLE PATEL, PARBHUBHAI N. NAME STREET ADDRESS STREET ADDRESS 3104 GLYNN AVE. CITY-ST-ZIP CITY ST-ZIP **BRUNSWICK GA** ☐ Change Addition ☐ Delete TITLE TITLE PATEL, AMRUTBHAI I. NAMÉ STREET ADDRESS 869 SOUTH DUPONT WAY STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP SMYRNA DE TD ☐ Change ☐ Addition ☐ Delete TITLE TITLE PATEL, DAHYABHAI N.

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.

NAME

STREET ADDRESS

CITY-ST-ZIP

SIGNATURE:

4015 OGEECHEE ROAD

SAVANNAH GA

NAMÉ

STREET ADDRESS

CITY-ST-ZIP