2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR

DOCUMENT

Country

6. Name and Address of Current Registered Agent.

Signature, typed or printed name of registered agent and title if applicable.

1. Entity Name SURAHI, INC.

Zip

SIGNATURE



Country

City

Principal Place of Business 140 NORTH STATE ROAD 415 POST OFFICE BOX 868 OSTEEN FL 32764

PATEL, RAMESHCHANDRA

OSTEEN FL 32764

140 NORTH STATE ROAD 415

the obligations of registered agent.

FILE NOW!!! FEE IS \$150.00

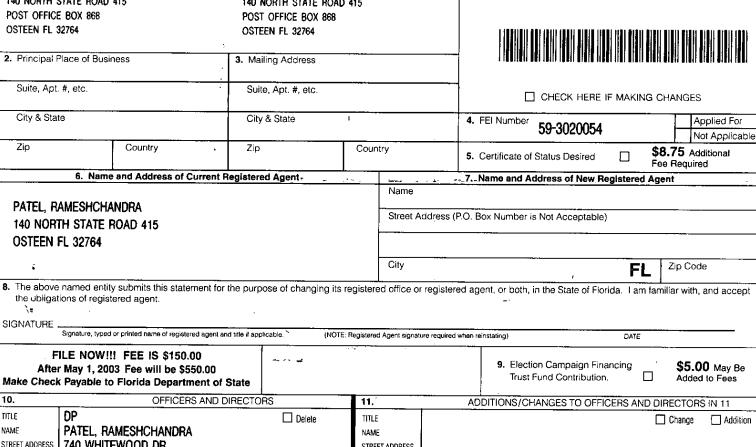
Mailing Address 140 NORTH STATE ROAD 415 POST OFFICE BOX 868 OSTEEN FL 32764

	,
2. Principal Place of Business	3. Mailing Address
Suite, Apt. #, etc.	Suite, Apt. #, etc.
City & State	City & State

Zip

FILED Feb 05, 2003 8:00 am Secretary of State

02-05-2003 90125 003 ***150.00



Afte Make Checl	r May 1, 2003 Fee will be \$550.00 k Payable to Florida Department of State				9. Election Campaign Financing Trust Fund Contribution.	□ \$5.0 Adde	O May Be d to Fees
10.	OFFICERS AND DIRECTORS		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11				
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DP PATEL, RAMESHCHANDRA 740 WHITEWOOD DR DELTONA FL	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP			☐ Change	☐ Addition
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12. 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.