

2000 UNIFORM BUSINESS REPORT (UBR)

000466 AF

DOCUMENT # L98000000434

1. Entity Name
AUROBINDO U.S.A., LLC

FILED

00 JAN 27 PM 1:00

**SECRETARY OF STATE
TALLAHASSEE, FLORIDA**



DO NOT WRITE IN THIS SPACE

Principal Place of Business
**9521 FONTAINEBLEAU BLVD., SUITE 411
MIAMI FL 33172**

Mailing Address
**9521 FONTAINEBLEAU BLVD., SUITE 411
MIAMI FL 33172-6829**

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

4. FEI Number
65-0860905

Applied For
Not Applicable

Zip

Country

Zip

Country

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

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

**CHITTAMURU, SUDHIR
9521 FONTAINEBLEAU BLVD., SUITE 411
MIAMI FL 33172**

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

**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

**MGR
CHITTAMURA, SUDHIR
9521 FONTAINEBLEAU BLVD., SUITE 411
MIAMI FL 33172**

☐ Delete

TITLE
NAME
STREET ADDRESS
CITY- ST- ZIP

☐ Change ☐ Addition

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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: SUDHIR CHITTAMURU

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER OR MANAGER

01/24/00 (305) 485 7711

Date

Daytime Phone #

CR2E083 (9/99)