

2003 LIMITED LIABILITY COMPANY UNIFORM BUSINESS REPORT (UBR)

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

05-05-2003 90695 002 ****50.00

0019235

DOCUMENT # MO2000000678

1. Entity Name

SHRINATH HOLDINGS LLC



Principal Place of Business

7422 SW 23RD STREET, APT. 42
MIAMI FL 33155

Mailing Address

7422 SW 23RD STREET, APT. 42
MIAMI FL 33155

2. Principal Place of Business

3245 Virginia Street

Suite, Apt. #, etc.

Apt 52

City & State

Miami, Florida

Zip

33133

Country

USA

3. Mailing Address

3245 Virginia Street

Suite, Apt. #, etc.

Apt 52

City & State

Miami, FL

Zip

33133

Country

USA



☒ CHECK HERE IF MAKING CHANGES

4. FEI Number 22-3848434

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$5.00 Additional
Fee Required

6. Name and Address of Current Registered Agent

DANI, MEHUL

7422 SW 23RD STREET, APT. 42
MIAMI FL 33155

7. Name and Address of New Registered Agent

Name

ROHIT PATEL

Street Address (P.O. Box Number is Not Acceptable)

15025 SW 67 Lane

City

Miami

FL

Zip Code

33193

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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

[Signature]

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

(NOTE: Registered Agent signature required when reinstating)

05-01-03

DATE

FILE NOW!!! FEE IS \$50.00
Make Check Payable to Florida Department of State
Due By May 1, 2003

9. MANAGING MEMBERS/MANAGERS

TITLE: D ☒ Delete
NAME: DANI, MEHUL
STREET ADDRESS: 7422 SW 23RD STREET, APT. 42
CITY-ST-ZIP: MIAMI FL 33155

TITLE: D ☐ Delete
NAME: KOTHARI, BRIJESH
STREET ADDRESS: 7422 SW 23RD STREET, APT. 42
CITY-ST-ZIP: MIAMI FL 33155

TITLE: D ☒ Delete
NAME: ALKA SECURITIES LIMITED
STREET ADDRESS: PLOT #10, 10 NS ROAD JUHU, VILE-PARLE
CITY-ST-ZIP: BOMBAY, INDIA 400054

TITLE: ☐ Delete
NAME:
STREET ADDRESS:
CITY-ST-ZIP:

TITLE: ☐ Delete
NAME:
STREET ADDRESS:
CITY-ST-ZIP:

TITLE: ☐ Delete
NAME:
STREET ADDRESS:
CITY-ST-ZIP:

10. ADDITIONS/CHANGES

TITLE: ☐ Change ☒ Addition
NAME: BHAVESH R PATEL
STREET ADDRESS: 3245 Virginia Street
CITY-ST-ZIP: Apt 52, FL - 33133

TITLE: ☐ Change ☐ Addition
NAME:
STREET ADDRESS:
CITY-ST-ZIP:

TITLE: ☐ Change ☐ Addition
NAME:
STREET ADDRESS:
CITY-ST-ZIP:

TITLE: ☐ Change ☐ Addition
NAME:
STREET ADDRESS:
CITY-ST-ZIP:

TITLE: ☐ Change ☐ Addition
NAME:
STREET ADDRESS:
CITY-ST-ZIP:

TITLE: ☐ Change ☐ Addition
NAME:
STREET ADDRESS:
CITY-ST-ZIP:

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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, MANAGER, OR AUTHORIZED REPRESENTATIVE

05/01/03 (786)552-5064

Date

Daytime Phone #

CR2E083 (10/02)