2002 UNIFORM BUSINESS REPORT (UBR)

Apr 30, 2002 8:00 am Secretary of State DOCUMENT # M32560 1. Entity Name 04-30-2002 90227 002 ***158.75 GADJRAJ AND SONS, IMPORT AND EXPORT, INC. Principal Place of Business Mailing Address 6600 NORTHWEST 82ND AVENUE 6600 NORTHWEST 82ND AVENUE MIAMI FL 33166 MIAMI FL 33166 2. Principal Place of Business 3. Mailing Address 8405 NW 29 Street 8405 NW 29 Street Suite, Apt. #, etc. Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE City & State City & State 4. FEI Number Applied For Miami, FL. Miami, FL. 59-2730959 Not Applicable Zip Country Country \$8.75 Additional 5. Certificate of Status Desired 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Singh, Ramkumar SINGH, RAMKUMAR Street Address (P.O. Box Number is Not Acceptable) 6600 NORTHWEST 82ND AVENUE MIAMI FL: 33166 8405 NW 29 Street Zip Code Miami 33122 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. Ram Kumar Singh (President) 4/16/02 SIGNATURE Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) 9. This corporation is eligible to satisfy its intangible FILE NOW!!! FEE IS \$150.00 10. Election Campaign Financing \$5.00 May Be Tax filing requirement and elects to do so. After May 1, 2002 Fee will be \$550.00 Trust Fund Contribution. Added to Fees (See criteria on back) Make Check Payable to Department of State 11. OFFICERS AND DIRECTORS 12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 TITLE ☐ Delete TITLE PS Change ☐ Addition SINGH, RUMKUMAR NAME NAME Singh Ramkumar 6600 NW 82 AVE STREET ADDRESS STREET ADDRESS 8405 NW 29 Street CITY-ST-ZIP MIAMI FL CITY-ST-ZIP <u>Miami, Fl√ 33122</u> TITLE ☐ Delete TITLE Change ☐ Addition NAME SINGH, SAROJNI NAME Singh, Sarojni 6600 NW 82 AVE STREET ADDRESS STREET ADDRESS 8405 NW 29 Street CITY-ST-ZIP MIAMI FL CITY-ST-ZIP Miami, FL-33122 TITLE **Delete** TITLE ☐ Change Addition ROHIT, SINGH-----NAME NAME. STREET ADDRESS 6600 N.W. 82ND AVENUE STREET ADDRESS CITY-ST-ZIP MIAMI FL CITY-ST-ZIP **X** Delete TITLE ☐ Change Addition NAME SINGH, RAHUL NAME STREET ADDRESS 6600 N.W. 82 AVENUE STREET ADDRESS CITY-ST-ZIP MIAMI FL 33166 CITY-ST-ZIP TITLE ☐ Delete TITLE ☐ Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE ☐ Delete TITLE ☐ Chance ☐ Addition NAME NAME STREET ADDRESS 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 appress, with all other like empowered.

SIGNATURE:

CR2E034 (9/01

FILED