

2001 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # N98000003543

1. Entity Name

FAIRWAY PARK RETIREMENT HOME INC.

FILED
Aug 09, 2001 8:00 am
Secretary of State

08-09-2001 90044 042 ****61.25

0007600

Principal Place of Business Mailing Address
16324 S.W. 99TH COURT 16324 S.W. 99TH COURT
MIAMI FL 33157 MIAMI FL 33157

00001708



DO NOT WRITE IN THIS SPACE

2. Principal Place of Business		3. Mailing Address		4. FEI Number 65-0900575		Applied For	
Suite, Apt. #, etc.		Suite, Apt. #, etc.				Not Applicable	
City & State		City & State		5. Certificate of Status Desired <input type="checkbox"/>		\$8.75 Additional Fee Required	
Zip	Country	Zip	Country				

6. Name and Address of Current Registered Agent				7. Name and Address of New Registered Agent			
SINGH, SAVITRIE J 11120 SW 174 TERRACE MIAMI FL 33157				Name: INDRANI S. PARSAUD Street Address (P.O. Box Number is Not Acceptable) 15569 SW 158th PL. City: Miami FL 33177 Zip Code: FL			

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: S. Singh DATE: 07-31-01
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

FILE NOW: FEE IS \$61.25 After September 12, 2001, min. will be \$236.25	9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/>	\$5.00 May Be Added to Fees	Make Check Payable to Department of State
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10. OFFICERS AND DIRECTORS				11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10			
TITLE	NAME	STREET ADDRESS	CITY-ST-ZIP	TITLE	NAME	STREET ADDRESS	CITY-ST-ZIP
DAO	SINGH, SAVITRIE J	11120 SW 174 TERR	MIAMI FL 33157				
DAAO	SINGH, JAGNARAIN	11120 SW 174 TERR	MIAMI FL 33157				
DP	RAMPERSAND, SANDRA	11120 SW 174 TERR	MIAMI FL 33157				
TP	PARSAUD, INDRANI	11120 SW 174 TERR	MIAMI FL 33157				
T	RAMPERSAND, LACHMAN	11257 SW 167 ST	MIAMI FL 33157				
T	SINGH, NARI MAHENDRA	11257 SW 167 ST	MIAMI FL 33157				

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 617, 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.

SIGNATURE: INDRANI S. PARSAUD TREASURER DATE: 07-31-01 305-256-3702
Signature and typed or printed name of signing officer or director

CR2E037 (5/01)