

# 2001 UNIFORM BUSINESS REPORT (UBR)

**FILED**  
**Jun 02, 2001 8:00 am**  
**Secretary of State**

06-02-2001 90001 006 \*\*\*150.00

0284822

DOCUMENT # P00000025821

1. Entity Name

ONE STOP INSURANCE SERVICES, INC.

Principal Place of Business

8010 SOUTH LAKE DRIVE  
 WEST PALM BEACH FL 33406

Mailing Address

8010 SOUTH LAKE DRIVE  
 WEST PALM BEACH FL 33406

660895



DO NOT WRITE IN THIS SPACE

2. Principal Place of Business

4624-B LAKE WORTH ROAD  
 Suite, Apt. #, etc.

3. Mailing Address

4624-B LAKE WORTH ROAD  
 Suite, Apt. #, etc.

City & State

LAKE WORTH, FLORIDA

City & State

LAKE WORTH, FLORIDA

4. FEI Number

36-4352612

Applied For

Not Applicable

Zip

33463

Country

FLORIDA

Zip

33463

Country

FLORIDA

5. Certificate of Status Desired

☐

\$8.75 Additional  
 Fee Required

6. Name and Address of Current Registered Agent

CORPORATE CREATIONS ENTERPRISES, INC.  
 941 FOURTH STREET #200  
 MIAMI BEACH FL 33139

7. Name and Address of New Registered Agent

Name

RAJENDRA B. SHANGVI

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

4624-B LAKE WORTH ROAD

City

LAKE WORTH

FL

Zip Code

33463

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

*R. B. Shangvi*

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

(NO) Registered Agent's signature required when reinstating

DATE

3/31/01

9. This corporation is eligible to satisfy its Intangible  
 Tax filing requirement and elects to do so.  
 (See criteria on back) ☐

FILE NOW !! FEE IS \$150.00  
 After MAY 1, 2001 Fee will be \$550.00  
 Make Check Payable to Department of State

10. Election Campaign Financing  
 Trust Fund Contribution. ☐

\$5.00 May Be  
 Added to Fees

11. OFFICERS AND DIRECTORS

TITLE D ☐ Delete  
 NAME SHANGVI, RAJENDRA B  
 STREET ADDRESS 8010 SOUTH LAKE DRIVE  
 CITY-ST-ZIP WEST PALM BEACH FL 33406

TITLE ☐ Delete  
 NAME  
 STREET ADDRESS  
 CITY-ST-ZIP

TITLE ☐ Delete  
 NAME  
 STREET ADDRESS  
 CITY-ST-ZIP

TITLE ☐ Delete  
 NAME  
 STREET ADDRESS  
 CITY-ST-ZIP

TITLE ☐ Delete  
 NAME  
 STREET ADDRESS  
 CITY-ST-ZIP

TITLE ☐ Delete  
 NAME  
 STREET ADDRESS  
 CITY-ST-ZIP

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE DIRECTOR & PRESIDENT ☒ Change ☐ Addition  
 NAME RAJENDRA B. SHANGVI  
 STREET ADDRESS 4624-B LAKE WORTH ROAD  
 CITY-ST-ZIP LAKE WORTH

TITLE SECRETARY & TREASURER ☐ Change ☒ Addition  
 NAME ANITA R. SHANGVI  
 STREET ADDRESS 4624-B LAKE WORTH ROAD  
 CITY-ST-ZIP LAKE WORTH, FLORIDA 33463

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

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 address, with all other like empowered.

SIGNATURE:

*R. B. Shangvi*

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

RAJENDRA B. SHANGVI

Date

2/31/01

Daytime Phone #

(561) 649-6220

CR2E034 (10/00)