2001 UNIFORM BUSINESS REPORT (UBR)

Mar 05, 2001 8:00 am DOCUMENT # P0000045464 **Secretary of State** 1. 5ntity Name M D R S. INC. 03-05-2001 90333 050 ***158.75 Principal Place of Business Mailing Address 1885 WEST COMMERCIAL BLVD. 1885 WEST COMMERCIAL BLVD. SUITE 190 PANAMANT SUITE 190 FT LAUDERDALE FL 33309 FT LAUDERDALE FL 33309 2. Principal Place of Business 3. Mailing Address Suite, Apt, #, etc. Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE City & State Applied For City & State 4. FEI Number <u>65-100 8998</u> Not Applicable Zip Country Zip Country \$8.75 Additional 5. Certificate of Status Desired 7. Name and Address of New Registered Agent 6. Name and Address of Current Registered Agent Name SHAH, BHARAT Street Address (P.O. Box Number is Not Acceptable) 1885 WEST COMMERCIAL BLVD. SUITE 190 FT LAUDERDALE FL 33309 Zip Code City 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. ered Agent signature required when reinstating) printed name of registered agent and FILE NOW!!! FEE IS \$150.00 9. This corporation is eligible to satisfy its Intangible \$5.00 May Be 10. Election Campaign Financing Tax filing requirement and elects to do so. After MAY 1, 2001 Fee will be \$550.00 Trust Fund Contribution. Added to Fees (See criteria on back) Make Check Payable to Department of State OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 11. ☐ Delete Change ☐ Addition TITLE TITLE SHAH, BHARAT NAME NAME 1885 WEST COMMERCIAL BLVD. #190 STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-7iP FT LAUDERDALE FL 33309 ☐ Change ■ Addition TITLE TITLE ☐ Delete DROTOS, JAMES NAME NAME 1885 WEST COMMERCIAL BLVD. #190 STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP FT LAUDERDALE FL 33309 ☐ Change ☐ Addition TITLE TITLE ☐ Delete MIHLROTH: JOHN ----NAME:= NAME 1885 WEST COMMERCIAL BLVD. #190 STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP FT LAUDERDALE FL 33309 TITLE ☐ Delete TITLE ☐ Change ☐ Addition ROSE. MIKE 1885 WEST COMMERCIAL BLVD. #190 STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP FT LAUDERDALE FL 33309 TITLE ☐ Delete TITLE Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Change ☐ Addition TITLE ☐ Delete TITLE NAME NAME STREET ADDRESS STREET ADDRESS

13. I hereby certify that the information supplied with this filling 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.

CITY-ST-ZIP

SIGNATURE:

CITY-ST-7IP

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

3/01/2001

(954)776 7604