

2001 UNIFORM BUSINESS REPORT (UBR)

FILED
Apr 27, 2001 8:00 am
Secretary of State
 04-27-2001 90355 045 ***150.00

DOCUMENT # P00000059724

1. Entity Name
MERJER INVESTMENTS, INC.

Principal Place of Business Mailing Address
14750 N.W. 77TH CT., STE. 110 **14750 N.W. 77TH CT., STE. 110**
MIAMI LAKES FL 33016 **MIAMI LAKES FL 33016**

2. Principal Place of Business 3. Mailing Address
 Suite, Apt. #, etc. Suite, Apt. #, etc.
 City & State City & State
 Zip Country Zip Country
33029 **USA**



DO NOT WRITE IN THIS SPACE

4. FEI Number **Applied For** ☒ Applied For ☐ Not Applicable
 5. Certificate of Status Desired ☐ **\$8.75** Additional Fee Required
 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent
RAMANATHAN, MAHENDRAN Name **TERESA PEREZ**
14750 N.W. 77TH CT., STE. 110 Street Address (P.O. Box Number is Not Acceptable)
MIAMI LAKES FL 33016 **18076 SW 26 CT**
 City **MIRAMAR** Zip Code **33029**

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

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

(NOTE: Registered Agent signature required when reinstating)

DATE

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 | | | 12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 | | |
|----------------------------|--------------------------------------|---------------------------------|---|---|--|
| TITLE | PSTD | <input type="checkbox"/> Delete | TITLE | <input type="checkbox"/> Change <input type="checkbox"/> Addition | |
| NAME | RAMANATHAN, MAHENDRAN | | NAME | | |
| STREET ADDRESS | 14750 N.W. 77TH CT., STE. 110 | | STREET ADDRESS | | |
| CITY-ST-ZIP | MIAMI LAKES FL 33016 | | CITY-ST-ZIP | | |
| TITLE | SECRETARY | <input type="checkbox"/> Delete | TITLE | <input type="checkbox"/> Change <input type="checkbox"/> Addition | |
| NAME | PEREZ, TERESA | | NAME | | |
| STREET ADDRESS | 18076 SW 26 CT | | STREET ADDRESS | | |
| CITY-ST-ZIP | MIRAMAR, FL 33029 | | CITY-ST-ZIP | | |
| TITLE | | <input type="checkbox"/> Delete | TITLE | <input type="checkbox"/> Change <input type="checkbox"/> Addition | |
| NAME | | | NAME | | |
| STREET ADDRESS | | | STREET ADDRESS | | |
| CITY-ST-ZIP | | | CITY-ST-ZIP | | |
| TITLE | | <input type="checkbox"/> Delete | TITLE | <input type="checkbox"/> Change <input type="checkbox"/> Addition | |
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| TITLE | | <input type="checkbox"/> Delete | TITLE | <input type="checkbox"/> Change <input type="checkbox"/> Addition | |
| NAME | | | NAME | | |
| STREET ADDRESS | | | STREET ADDRESS | | |
| CITY-ST-ZIP | | | 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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E034 (10/00)