

**FOR PROFIT CORPORATION
UNIFORM BUSINESS REPORT (UBR)**

FILED
Sep 10, 2002 8:00 am
Secretary of State

09-10-2002 90228 025 ***150.00

DOCUMENT # **P00000060742**

1. Entity Name

MENONS DESTINATION Mgt, Inc. ✓

DO NOT WRITE IN THIS SPACE

978911

2. Principal Place of Business

6108 CURRY FORD RD

Suite, Apt. #, etc.

216

3. Mailing Address

6108 CURRY FORD RD

Suite, Apt. #, etc.

216

City & State

ORLANDO, FL

City & State

ORLANDO, FL

4. FEI Number

59-3655176

Applied For

Not Applicable

Zip

FL 32822

Country

U.S.A.

Zip

32822

Country

U.S.A.

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

7. Name and Address of Current Registered Agent

Name

MENON SURESH

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

**6108 CURRY FORD
#216**

City

ORLANDO

FL

Zip Code

32822

**DO NOT WRITE
IN THIS SPACE**

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

9/4/2002

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

January 1 - May 1 Fee is \$150.00

After May 1, Fee is \$550.00

Amended UBR is \$61.25

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

NAME

STREET ADDRESS

CITY-ST-ZIP

**PDBD-
MENON SURESH
6108 CURRY FORD RD #216
ORLANDO, FL-32822**

TITLE

NAME

STREET ADDRESS

CITY-ST-ZIP

TITLE

NAME

STREET ADDRESS

CITY-ST-ZIP

**VPCD
DIVAKARAN DEVI
6108 CURRY FORD Suite #216
ORLANDO, FL-32822**

TITLE

NAME

STREET ADDRESS

CITY-ST-ZIP

TITLE

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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 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 #

9/4/2002

407-249-2266

CR2E034B (12/01)

Attachment

978911

Menons Destination Mgt, Inc.

6108 Curry Ford Road

Suite #216

Orlando, FL 32822

TO WHOMSOEVER IT CONCERNS.

#PO00000742

We did not receive this form till 9/3/2002.
We tried to print it out of the web
site but were unable to do so. So
please pardon our delay in filling and
please do not charge us the extra
fee.

Yours Truly.



SUMESHA P. MENON.

Menons Destination Mgt, Inc.

6108 Curry Ford Road

Suite #216

Orlando, FL 32822

FEI # 59-3655176