9/4/2002-90096-013-\$150.00-\$150.00

FILED

2692 UNIFORM BUSINESS REPORT (UBR)

SIGNATURE:

02 OCT 25 PM 3: 42 P00000067354 **DOCUMENT#** 1. Entity Name SECRETARY OF STATE TALLAHASSEE, FLORIDA DINANI, INC. Principal Place of Business Mailing Address 6419 W. NEW BERRY RD 6419 W. NEW BERRY RD GAINESVILLE FL 32606 **GAINESVILLE FL 32605** 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE City & State City & State 4. FEI Number Applied For 59-3661892 Not Applicable Ζiρ Country Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent JIVA, ALIM Street Address (P.O. Box Number is Not Acceptable) 6419 W. NEW BERRY RD GAINESVILLE FL 32605 City Zip Code 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. I am familiar with, and accept the obligations of registered agent. 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 FILE NOW!!! FEE IS \$550.00 Tax filing requirement and elects to do so. 10. Election Campaign Financing After September 13, 2002 Fee will be \$750.00 \$5.00 May Be (See circaria on back) Trust Fund Contribution.~ Make Check Payable to Department of State 11. OFFICERS AND DIRECTORS 12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 TITLE ☐ Delete TITLE (4/02)Change Addition JIVA, SALIM NAME NAME STREET ADDRESS 6419 W. NEW BERRY RD STREET ADDRESS CR2E034 CITY-ST-ZIP GAINESVILLE FL 32605 CITY-ST-ZIP ☐ Delete TITLE ☐ Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Deleta TITLE ☐ Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST:78 CITY-ST-7IP TITLE ☐ Delete TITLE ☐ Change ■ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP MLE ☐ Delete TITLE ☐ Change NAME ☐ Addition NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE Delete TOLE ☐ Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP 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 12 if changed, or on an attachment with an address, with all other like empowered.

Dinani , Inc. 6419 w new berry rd Gainesville, fl 32605

Sadru jewelers, Inc. 3100 collage rd Ocala, fl 34474

October 03 2002

DIVISION OF CORPORATIONS P.O. BOX 6327 TALLAHASSEE,FL 32314

Dear sir,

AGOVIT

My name is salim jiva. I am officer, and director of **Dinani**, Inc./sadru jewelers, Inc. due to not received the previous notices uniform business report 2002. we file the report in second notice with \$150.00 which is already been received. please expect this UNIFORM BUSINESS REPORT 2002 and waive the additional charges.

Thanks for your cooperation

Sincerely,

Salim jiva