FILED 2001 UNIFORM BUSINESS REPORT (UBR) Jun 19, 2001 8:00 am **DOCUMENT# Secretary of State** 06-19-2001 90429 030 \*\*\*150.00 Principal Place of Business Mailing Address NE WALDO PD NE WALDO RD 1602-A 1602A CANVESTILL - FL GIAINESVILLE- FL 32609 80059279 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE City & State City & State Applied For 59 - 3667504 Not Applicable 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 Name CHAUDHARI Street Address (P.O. Box Number is Not Acceptable) 1602-A NE WALDO GAWSSUILE - FC 32609 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 FILE NOW!!! FEE IS \$150.00 9. This corporation is eligible to satisfy its Intangible 10. Election Campaign Financing \$5.00 May Be 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 11. OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 CHAUDHARI DEVANG TITLE ☐ Addition CR2E034 (11/00 NAME NAME STREET ADDRESS WALDO RO STREET ADDRESS CITY-ST-ZIF CITY-ST-ZIP ☐ Delete Change ☐ Addition NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE ☐ Delete Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-7IP CITY-ST-ZIP TITLE ☐ Delete Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE ☐ Defete Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITI F ☐ Delete TITLE Change Addition NAME

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 GAUDHAR Prevident 6.1101 352-419-0448
DEFICER OR DIRECTOR

Date

Date

Date

Date

Director

STREET ADDRESS

CITY-ST-ZIP

STREET ADDRESS

CITY-ST-ZIP

attachment

+NEEL GROUP INC 1602 - A, NE WALDO ROAD GAINESVILLE, FL 32609

DIVISION OF CORPORATIONS UNIFORM BUSINESS REPORT FILINGS P O BOX 1500 TALLAHASSEE, FL 32302-1500

## CORPORATION ANNUAL FILING FEE 2001

ENTITY NAME: NEEL GROUP INC

DOCUMENT# P00000082938

FEINumber: 59-3667504

We enclose a check of #150.00 towards fee for 2001 Uniform Business Report.

As we have not received your original green printed form we are not enclosing any other document.

Thanking You,

President April 4, 2001