

2002 UNIFORM BUSINESS REPORT (UBR)

FILED
May 27, 2002 8:00 am
Secretary of State

05-27-2002 90290 034 ***150.00

DOCUMENT # P00000095866

1. Entity Name

NEBULA SOFTWARE SOLUTIONS, INC.

Principal Place of Business

~~650 BARTON BROOK PLACE~~
~~SUITE #100~~
WINTER PARK FL 32793

Mailing Address

PO BOX 4621
WINTER PARK FL 32793

2. Principal Place of Business

871 CAPE DORY COURT

3. Mailing Address

Suite, Apt. #, etc.

SUITE # 1106

Suite, Apt. #, etc.

City & State

WINTER PARK, FL

City & State

Zip

32792

Country

U.S.A

Zip

Country

4. FEI Number

59-3680141

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

BONDADA, P.E., MURTHY V.A. DR
850 BARTON BROOK PLACE, #106
WINTER PARK FL 32792

7. Name and Address of New Registered Agent

Name

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

City

FL

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.

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

(NOTE: Registered Agent signature required when reinstating)

4/28/02
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, 2002 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

TITLE **D** ☐ Delete
NAME BONDADA, P.E., MURTHY V.A. DR.
STREET ADDRESS PO BOX 4621
CITY-ST-ZIP WINTER PARK FL 32793

TITLE **D** ☐ Delete
NAME BONDADA, ESQ., VIJAY V.
STREET ADDRESS 124 W. 60TH ST., APT., #11K
CITY-ST-ZIP NEW YORK NY 10023

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE ☐ Change ☐ Addition

NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition

NAME
STREET ADDRESS
CITY-ST-ZIP

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TITLE ☐ Change ☐ Addition

NAME
STREET ADDRESS
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: MA Bondada (Dr. Murthy V.A. Bondada)

Date

Daytime Phone #

CR2E034 (9/01)