2003 FOR PROFIT CORPORATION

UNIFORM BUSINESS REPORT (UBR)

DOCUMENT #

P00000095898

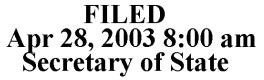


1. Entity Name ASH RANA, INC.

Principal Place of Business 400 WEST 44TH ST MIAMI BEACH FL 33140

Mailing Address 400 WEST 44TH ST MIAMI BEACH FL 33140

2. Principal Place of Business 3. Mailing Address 4590 NE 2ND AUE ZND AUE 4590 NE Suite, Apt. #, etc. Suite, Apt. #, etc. City & State City & State



04-28-2003 91499 033 ***150.00



CHECK HERE IF MAKING CHANGES

Applied For

City & State				City & State			4. FEI Number 65-1034010			Ap	plied For
MIAW	MAMI, PL			MIAMI, PL			03 1004010				t Applicable
Zip 33137	1 1 1		Zip	Cour		4	5.	Certificate of Status Desired		8.75 Add se Require	
Name and Address of Current Registered Agent						7. Name and Address of New Registered Agent					
						Name					
RANA, ASHISH N 400 WEST 44TH ST						Street Address (P.O. Box Number is Not Acceptable)					
MIAMI BEACH FL 33140											
						City City Code					
						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. I am familiar with, and accept the obligations of registered agent.											
CIONATURE											
SIGNATURE .	Signature, typed	or printed name of registered agent	and title if app	olicable. (NOTE	gent signati	nt signature required when reinstating) DATE					
FILE NOW!!! FEE IS \$150.00								9. Election Campaign Finance	ring	¢s o	0 Мау Ве
After May 1, 2003 Fee will be \$550.00								Trust Fund Contribution.	,lg		to Fees
Make Check Payable to Florida Department of State											,
10.	OFFICERS AND DIRECTORS 1						1	DDITIONS/CHANGES TO OFFICE			
TITLE	PD			☐ Delete	TITLE		PD	, suprabha T.	4	Change	☐ Addition
		SUPRABHA T			NAME		George	Samaga Dr.			
	400 WEST	441H SI ACH FL 33140			STREET A		10404	, Va ZZIZY			
		10H FE 33140				- 7.11	VSD	1, 00 00.01		Channa	☐ Addition
TITLE	VSD	CARRIELLE		☐ Delete	TITLE NAME		(200m/16	Gabrielle S.	Į	Change	☐ Addition
NAME STREET ADDRESS	GEORGE, GABRIELLE S 400 WEST 44TH ST					ETADDRESS 10407 Samaga Dr.					
	MIAMI BEACH FL 33140			CITY-ST		10 (0 4n	n, Va zzizy				
TITLE	DT	101112 00110		☐ Delete	TITLE	•	D.T	w, va 20127	. — . 	Change	Addition
NAME	GEORGE,	GENE V		Delete	NAME			L. Gene V.	•	-	_
	the state of the s				STREET A	EET ADDRESS 1040 7 Samage Dr.					
CITY-ST-ZIP	MIAMI BEACH FL 33140				CITY-ST	-ZIP	Calter	1, Va 22124			
TITLE	. –	Per en Lis		Delete	-TITLE				[Change	☐ Addition
NAME					NAME			•			
STREET ADDRESS		•			STREET A						
CITY-ST-ZIP					CITY-ST	-ZIP	<u> </u>				
TITLE				☐ Delete	TITLE				[Change	☐ Addition
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CITY-ST-ZIP			•		_}-	- LIF		·		7 ob	17 A 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2
TITLE				Delete	TITLE				Į	Change	☐ Addition
NAME STREET ADDRESS					NAME STREET A	ADDRESS					}
CITY-ST-ZIP	ı				CITY-ST						
		a information accasiical	thic filip -	doce not qualify for			l tad in Saction	119.07(3)(i), Florida Statutes. I fur	ther cortif	v that the in	oformation
indicated	on this repor	e imormation supplied with rt or supplemental report is	true and	accurate and that n	ına exemp ıv signatur	e shall h	ave 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

305-572-9088