PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

APPLICATION FOR SIM Smith Secretary of State DIVISION OF CORPORATIONS

DOCUMENT #

P01000017087

1. Corporation Name

MAHARAJA, INC.

Principal Place of Business

12239-41 UNIVERSITY BLVD ORALNDO FL 32817 Mailing Address

12239-41 UNIVERSITY BLVD ORALNDO FL 32817 FILED

02 DEC 25 AHII: 27

SECRETAL OF STATE TALLATASA DE PEGRIDA



Daytime Phone #

If above addresses are incorrect in any way, line through incorrect information and enter correction below.							700009686187 12/26/0201015011 **150.00		
New Principal Office Address, If Applicable 3. New Ma				ling Office Address, If Applicable			Date Incorporated or Qualified To Do Business in Florida 02/15/2001		
Suite, Apt. #, etc. Suite, Ap				#, etc.					
City & State	<u> </u>	City & State	City & State			59-3702 do) Applied For Not Applicable			
Zip Country		Country	Zip C		Country	,			\$8.75 Additional Fee required for a Certificate of Status
7. Names	and Street Add	Idresses of Each Officer and	/or Director (Flo	rida nonprof	it corpora	tions must list at lea	st 3 directors)		·
Title(s)	e(s) Name of Officers and/or Directors			Street Address of Each Officer and/or Director				City / State / Zip	
PD	PATEL, RAJENDRA K			9810 PEDDLERS WAY				ORLANDO FL 32817	
D	PATEL, NATAVARBHAI D			1455 SEMORAN BLVD, #223				CASSELBERRY FL 32707	
			······································				 		
							,		
8. Name and Address of Current Registered Agent						Name and Address of New Registered Agent			
PATEL, PŘÁDOBH C ESQ						Name PATEL MATAVARBHAI D			
815 ORIENTA AVE, STE 6						Street Address (P.O. Box Number is Not Acceptable) 1H55 5 macm BM 123			
ALTAMONTE SPRINGS FL 32701					Suite, Apt. #, Etc.				
						City Cu	nselber	O	tate Zip Code
10. I, being Signature o Registered	, ,	e registered agent of the abo	·	RE	QU	th and accept the ob	oligations of Secti	Date 4 /2/	0505, F.S.
this rein owed by	statement app the corporati	officer or director or the rece plication, the reason for diss on have been paid and the rue and accurate, and my si	olution has been names of individ	eliminated, luals listed o	the corpo n this forr	rate name satisfies to do not qualify for a	the requirements an exemption un	of section 607,0401 or 61	

MAHARAJA, INC. 12239-41 UNIVERSITY BLVD ORLANDO, FL. 32817

December 18, 2002

Secretary of State Division of Corporation P.O.Box 6327 Tallahassee Fl 32314

Ref:-

Document #P01000017087 EIN:-59-3702201 Waiver of penalty

Dear Sir/Madam,

With reference to above, I undersigned NATVARBHAI PATEL, VIce President of MAHARAJA, INC. would like to request you to waive the penalty for non-payment of Annual Filing Fees for 2002 on the following grounds.

I never received the Annual Filing Form for 2002, may be lost in the mail and/or delivered back to you, which was not forwarded to us. Unfortunatley, I never realized that I did not pay the annual filing fee for 2002 as I did not received the Filing Form for the year 2002. I made a mistake due to lack of knowledge and information & unavoidable circmustances. I would like to request you to waive the penalty on the basis of lack of knowledge, information and misunderstandings.

I am enclosing herewith the check of \$150.00 being an annual filing fee for 2002 as an exceptional case. I assure you that this is not going to happen in the future, if I will receive the Form on or before due date. Please waive the penalty on the basis of lack of knowledge, information, misunderstanding and undue hardship in this bad economy. Thanking you in advance for your cooperation. Soary for the inconvenience that caused to you. Sincerely,

(NATVARBHAI PATEL)

encl:- as above Ck of \$150