

FILED
May 07, 2002 8:00 am
Secretary of State

05-07-2002 90236 002 ***150.00

2002 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P01000023550

1. Entity Name
DISI MANAGEMENT CORP.

Principal Place of Business
12600 SOUTH BELCHER ROAD
SUITE 102K
LARGO, FL
33773

Mailing Address
12600 SOUTH BELCHER ROAD
SUITE 102K
LARGO, FL
33773

2. Principal Place of Business
8419 125TH PLACE N

3. Mailing Address
8419 125TH PLACE N.

Suite, Apt. #, etc.

Suite, Apt. #, etc.

DO NOT WRITE IN THIS SPACE

City & State
LARGO, FL.

City & State
LARGO, FL.

4. FEI Number
59-3701242

Applied For
Not Applicable

Zip
33773

Country

Zip
33773

Country

5. Certificate of Status Desired ☐ \$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

SPIEGEL & UTRERA, P.A.
343ALMERIA AVENUE
CORAL GABLES, FL. 33134

7. Name and Address of New Registered Agent

Name
ASHARIA, AMIRALI
Street Address (P.O. Box Number is Not Acceptable)
8419 125TH PLACE N.

City
LARGO, FL Zip Code
33773

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 Amirali Asharia AMIRALI ASHARIA - PRESIDENT 4-26-02
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 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 ☐ \$5.00
Trust Fund Contribution. May Be Added to Fees

11. OFFICERS AND DIRECTORS

TITLE	PD	<input type="checkbox"/> Delete
NAME	ASHARIA, AMIRALI	
STREET ADDRESS	12600 SOUTH BELCHER ROAD	
CITY - ST - ZIP	LARGO, FL. 33773	
TITLE	STD	<input type="checkbox"/> Delete
NAME	ASHARIA, SHAKKER	
STREET ADDRESS	12600 SOUTH BELCHER ROAD	
CITY - ST - ZIP	LARGO, FL. 33773	
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY - ST - ZIP		
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY - ST - ZIP		
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY - ST - ZIP		

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE	PD	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	ASHARIA, AMIRALI	
STREET ADDRESS	8419 125TH PLACE N.	
CITY - ST - ZIP	LARGO, FL. 33773	
TITLE	STD	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	ASHARIA, SHAKKER	
STREET ADDRESS	8419 125TH PLACE N.	
CITY - ST - ZIP	LARGO, FL. 33773	
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY - ST - ZIP		
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY - ST - ZIP		
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> 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: Amirali Asharia AMIRALI ASHARIA, PRES. 4-26-02

CR2034 (9/99)