

**FOR PROFIT CORPORATION
UNIFORM BUSINESS REPORT (UBR)**

FILED
May 16, 2002 8:00 am
Secretary of State

05-16-2002 90055 020 ***150.00

DOCUMENT # **P01000041870**

1. Entity Name

R N V N INC

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business

4800 Babcock st

Suite, Apt. #, etc.

3. Mailing Address

4800 Babcock st

Suite, Apt. #, etc.

DO NOT WRITE IN THIS SPACE

City & State

PALM BAY FL

City & State

PALM BAY FL

4. FEI Number

59-3722920

Applied For

Not Applicable

5. Certificate of Status Desired ☐

**\$8.75 Additional
Fee Required**

Zip

32905

Country

BREVARD

Zip

32905

Country

BREVARD

7. Name and Address of Current Registered Agent

Name

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

City

FL

Zip Code

**DO NOT WRITE
IN THIS SPACE**

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

V. R. Patel

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

(NOTE: Registered Agent Signature required when reinstating)

DATE

4/30/02

9. This corporation is eligible to satisfy its Intangible
Tax filing requirement and elects to do so.
(See criteria on back) ☐

January 1 - May 1 Fee is \$150.00

After May 1, Fee is \$550.00

Amended UBR is \$61.25

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	P.T.S.D.
NAME	VIBHAVEN PATEL
STREET ADDRESS	900 FALLS TRAIL
CITY - ST - ZIP	MALABAR FL 32950
TITLE	VICE PRESIDENT
NAME	ROHITKUMAR D PATEL
STREET ADDRESS	900 FALLS TRAIL
CITY - ST - ZIP	MALABAR FL 32950
TITLE	
NAME	
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CITY - ST - ZIP	
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**DO NOT WRITE
IN THIS SPACE**

13. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(f), 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 on an attachment with an address, with all other like empowered.

SIGNATURE:

V. R. Patel

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

DATE

Daytime Phone #

4/30/02

CR2E034B (12/01)