FILED May 01, 2003 8:00 am Secretary of State 05-01-2003 91000 029 ***158.75

2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. CHECK HERE IF MAKING CHANGES City & State City & State 4. FEI Number 65-1102489 Not Zip Country Zip Country 5. Certificate of Status Desired \$8.75 & Required Foo Required 7. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent SAROOP, HARRIBERSAD 3700 NW 197H AVENUE MIAMI, Et. 33162 MIAMI, Et. 33162 Typical and the purpose of changing its registered office or registered agent, or both, in the State of Florida. I am familiar with, a the coligations of projecter dyagent 1 and familiar with, a state of Florida in the purpose of changing its registered office or registered agent, or both, in the State of Florida. I am familiar with, a state of Florida in the purpose of changing its registered office or registered agent, or both, in the State of Florida. I am familiar with, a state of Florida in the coligations of projecter dyagent 1 and familiar with, a state of Florida in the purpose of changing its registered office or registered agent, or both, in the State of Florida. I am familiar with, a state of Florida in the purpose of changing its registered agent, or both, in the State of Florida. I am familiar with, a state of Florida in the purpose of changing its registered agent, or both, in the State of Florida. I am familiar with, a state of Florida in the purpose of changing its registered agent, or both, in the State of Florida. I am familiar with, a state of Florida in the purpose of changing its registered office or registered agent, or both, in the State of Florida. I am familiar with, a state of Florida in the purpose of changing its registered office or registered agent or both, in the State of Florida in the purpose of changing its registered agent of the purpose of			172	901191			H AVENUE	Mailing Address	P010000469 CUSTOM FURN	THE DESCRIPTION OF THE STREET	1. Entity Nam H & R SO Principal Place 13700 NW 11
Sulfe, Apt. #, etc. GHECK HERE IF MAKING CHANGES City & State City & State A. FEI Number 65-1102489 Apt. Zip Country Zip Country S. Certificate of Status Desired S. To. Add Fee Required SAROOP, HARRIJBERISAD State A. FEI Number 65-1102489 Apt. SAROOP, HARRIJBERISAD State A. FEI Number is Not Acceptable Making State STORY AVESUAL MINISTER STATE Apt. The above named skiptly submits this statesport of the purpose old-Sanding its registered office or registered agent, or both, in the State of Fortica. I am animar with, a three continuous or information of registered agent, or both, in the State of Fortica. I am animar with, a three continuous or information of registered agent, or both, in the State of Fortica. I am animar with, a three continuous or information of registered agent, or both, in the State of Fortica. I am animar with, a three continuous or information of registered agent, or both, in the State of Fortica. I am animar with, a three continuous or in the state of Fortica. I am animar with, a three continuous or information of registered agent, or both, in the State of Fortica. I am animar with, a three continuous or in the state of Fortica. I am animar with, a three continuous or in the state of Fortica. I am animar with, a three continuous or in the state of Fortica. I am animar with, a three continuous or in the state of Fortica. I am animar with, a three continuous or in the state of Fortica. I am animar with, a three continuous or in the state of Fortica. I am animar with, a state notices of Fortica and three continuous or in the state of Fortica. I am animar with, a state notices of Fortica animar with, a state notices of Fortica. I am animar with, a state notices of Fortica. I am animar with a state notices of Fortica. I am animar with a state notices of Fortica. I am animar with a fortical animar with a state notices of Fortica. I am animar with a fortical			, 			···		MIAMI, FL 3316			
Cety & State City & State Country Country Country Country S. Certificate of Status Desired S. To Annual Address of Current Registered Agent 7. Name and Address of New Registered Agent 7. Name and Address of No. Accounted Agent Agent 7. Name and Address of Name Agent 7. Na	ill a l Elli ibbi										
Section Sect	lied For		WAKING CHAN		A 551				<u> </u>		·
SAROOP, HARRIPERSAD 13700 NW 1971 AVENUE A. The above named drifty 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, is the obligations of prejusered register. SIGNATURE FL. 200 Code A. The above named drifty 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, is the obligations of prejusered register. SIGNATURE FL. 200 Code A. The above named drifty submits this statement register and the or registered agent, or both, in the State of Florida. I am familiar with, is the obligations of prejusered register. SIGNATURE FL. 200 Code A. The above named drifty submits this statement register. FL. 200 Code A. The above named drifty submits this statement register. FL. 200 Code A. The above named drifty submits this statement register. FL. 200 Code A. The above named drifty submits this statement register. FL. 200 Code A. The above named drifty submits this statement register. FL. 200 Code A. The above named drifty submits this statement register. FL. 200 Code FL. 200 Code A. The above named drifty submits this statement register. FL. 200 Code FL. 20	Applicable	Not Ar			4. 76.						
SAROOP, HARRIPERSAD 13700 NW 197H AVENUE MIAMIL FL 33162 17.551 NW 6 P AVE City MARM I FL 35162 17.551 NW 6 P AVE City MARM I FL 35162 17.551 NW 6 P AVE City MARM I FL 35162 18. The above names drifty submits this statement for the purpose of originating its registered office or registered agent, or both, in the State of Florida. I sam familiar with, a the obligations of professional masses agent, or both, in the State of Florida. I sam familiar with, a the obligations of professional masses agent, or both, in the State of Florida. I sam familiar with, a the obligations of professional masses agent, or both, in the State of Florida. I sam familiar with, a the obligations of professional masses agent, or both, in the State of Florida. I sam familiar with, a the obligations of professional masses agent, or both, in the State of Florida. I sam familiar with, a the obligations of professional masses agent, or both, in the State of Florida. I sam familiar with, a the obligations of professional masses agent, or both, in the State of Florida. I sam familiar with, a the obligations of professional masses agent, or both, in the State of Florida. I sam familiar with, a same agent, or both, in the State of Florida. I sam familiar with, a same agent, or both, in the State of Florida. I sam familiar with, a same agent, or both, in the State of Florida. I sam familiar with, a same agent, or both, in the State of Section 110. Add of Florida. I sam familiar with, a same agent, or both, in the same agent, or same agent, or both, in the same agent, or both, in the same agent, or same agent, or both, in the same agent agent agent. 10.	ional			tificate of Status Desired	5. Cert	ry 	Cour				Zip
The above named-dipty submits this statement of the purpose of transpling its registered office or registered agent, or both, in the State of Florida. I am familiar with, a state of Florida. I am familiar w		nt	stered Agent	SAR60 P Number is Not Acceptable)	ccky			nt Registered Agent	ـــــــــــــــــــــــــــــــــــــ	HARRIPERSAD 197H AVENUE	13700 NW
A. The above names eight submits his statement of the purpose of standing its registered office or registered agent, or both, in the State of Florida. I am familiar with, a the obligations of presidence diagent. SIGNATURE File NoWIII File S 150.00				6th AVE	ИW	170				· ·	//
THE NOUVILLE FEETS \$160.00 After May 1 2003. Fee will be \$550.00 After May 2 2003. Fee will be \$550.00 After May 1 2003. Fee will be \$550.00 After May 1 2003. Fee will be \$550.00 After May 2 2003. Fee will be	3162										
FILE NOWIII FEE IS \$150.00 After May 1 2003. Fee will las \$55.00 Make Check Payable to Florida Department of State 10.		_	4-29					1	dragent	tions of registerectag	the obligat
TITLE SAROOP, HARRIPERSAD SINEET ADDRESS CITY-ST-2P MAKE STREET ADDRESS CITY-ST-2P MAKE STREET ADDRESS CITY-ST-2P TITLE AGAME STREET A		\$5.00 N Added to i	cing	9. Election Campaign Financin		7,5	(10)2.1198	9	FEE IS \$150 00 / Fee will be \$550 00	FILE NOWIII FEE May 1 2003 Fee	After
NAME SIRET ADDRESS CITY-ST-2P Delete NAME SIRET ADDRESS CITY-ST-2P NAME SIRET ADDRESS CITY-ST-2P NAME SIRET ADDRESS CITY-ST-2P Delete NAME SIRET ADDRESS CITY-ST-2P TITLE Delete NAME SIRET ADDRESS CITY-ST-2P TITLE Delete NAME SIRET ADDRESS CITY-ST-2P TITLE SIRET ADDRESS CITY-ST-2P TITL	IN 11			TIONS/CHANGES TO OFFICERS	ADDIT				OFFICERS AND	PD .	
RAME STREET ADDRESS 17251 NE 6TH AVENUE CITY-ST-2P MIAMI, FL 33162 Delete	Addition	ordinge C	ن ن			1 ADDRESS	NA. Str	LEI UEH	TH STREET	SAROOP, HARR 120 NW 197TH 8	NAME STREET ADDRESS
TITLE Gelete TITLE Gelete NAME STREET ADDRESS CITY-ST-ZP CITY-ST-Z	Addition	Change 6	a CI	Triky 6 Mave C 33162	RUBP, R. 51 HUL AMI FI	1 ADDRESS S1-ZIP	NAA Str	☐ Del	H AVENUE	SAROOP, RICKY 17251 NE 6TH A	NAME STREET ADDRESS
NAME STREET ADDRESS CITY-ST-ZP TITLE NAME STREET ADDRESS CITY-ST-ZIP TO be lette TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CI	Addition	Change [C1			1 ADDRESS	NAN STR	Oel			NAME Street address
NAME STREET ADDRESS CITY-ST-2P TITLE NAME STREET ADDRESS CITY-ST-2IP TITLE NAME STREET ADDRESS CITY-ST-2IP TITLE NAME STREET ADDRESS CITY-ST-2IP TO Belete NAME STREET ADDRESS CITY-ST-2IP TO Belete NAME STREET ADDRESS CITY-ST-2IP 12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3X(i), Florida Statutes. I further certify that the information stated on this record or supplied with this filing does not qualify for the exemption stated in Section 119.07(3X(i), Florida Statutes. I further certify that the information stated on this record or supplied with this filing does not qualify for the exemption stated in Section 119.07(3X(i), Florida Statutes. I further certify that the information stated on this record or supplied with this filing does not qualify for the exemption stated in Section 119.07(3X(i), Florida Statutes. I further certify that the information stated on this record or supplied with this filing does not qualify for the exemption stated in Section 119.07(3X(i), Florida Statutes. I further certify that the information stated on this record or supplied with this filing does not qualify for the exemption stated in Section 119.07(3X(i), Florida Statutes.)	Addition	Change [cı			1 ADDRESS	NAA Str	□ 0ei	,	,	NAME STHEET ADDHESS
NAME STREET ADDRESS CITY-ST-ZIP 12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3Xi). Florida Statutes. I further certify that the information of this report or supplied with this filing does not qualify for the exemption stated in Section 119.07(3Xi). Florida Statutes. I further certify that the information of this report or supplied with this filing does not qualify for the exemption stated in Section 119.07(3Xi). Florida Statutes. I further certify that the information of the certification of the certifica	Addition	Change [. □ CI	,		T ADDRÆSS	NAA Str	□ Dele			NAME STREET ADDRESS
indicated on this report or suppliemental 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 o	☐ Addition	Change [<u></u> □ CI			1 ADDRESS	NAA Str	□ Dele			NAME STREET ADDRESS
SIGNATURE: 4 / 10/1 / 14-29-03 303-756-14	r director i	n officer or c	h: that I am an c	al effect as if made under oath; to Statutes; and that my name appo	e same leda	ıre shail hav	and that my signs	is true and securate ar	r su¤óleme#tal report is	d on this report or sup rporation or the rezelo i, or on an attachment	indicated of the cor changed