## 2002 UNIFORM BUSINESS REPORT (UBR)

of the corporation or the receiver or trustee empowered to execute this report as required by Chapt changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

## FILED Mar 25, 2002 8:00 am P01000047584 **DOCUMENT # Secretary of State** 1. Entity Name MILRAJ DESIGN STUDIOS, INC. 03-25-2002 90106 037 \*\*\*158 75 Mailing Address Principal Place of Business 20130 NE 3RD COURT 20130 NE 3RD COURT **MIAMI FL 33179 MIAMI FL 33179** Principal Place of Business Mailing Address Sw 54th Cf. DO NOT WRITE IN THIS SPACE Qity\_&\_State Miramar Wangs \$8.75 Additional 7. Name and Address of New Registered Agent 6. Name and Address of Current Registered Agent SINGH, RAVINDERJIT 20130 NE 3RD COURT **MIAMI FL 33179** 8. The above named entity submits this statement for the purpose of changing its registered **SIGNATURE** Signature, typed of 9. This corporation is eligible to satisfy its Intangible FILE NOW!!! FEE IS \$150.00 10. Election Campaign Financing \$5.00 May Be Tax filing requirement and elects to do so. After May 1, 2002 Fee will be \$550.00 Trust Fund Contribution Added to Fees (See criteria on back) Make Check Payable to Department of State ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 OFFICERS AND DIRECTORS 12. 11. CR2E034 (9/01) ☐ Delete TITLE TITLE President SINGH, RAVINDERJIT NAME NAME RAVINDERSIT SINGH 20130 NE 3RD COURT #8 STREET ADDRESS STREET ADDRESS MIXMI FL 33179 CITY-ST-ZIP 13000 SW 54+4 Ct Myamar FL33025 CITY - ST-7IP TITI F ☐ Delete TITLE Vice-President BRAVO, JORGE R NAME NAME JURGE R. BRAVO 20130 NE 3RD COURT #8 STREET ADDRESS STREET ADDRESS MIAMI: FL-33179-CITY-ST-ZIP 13000 SW SUTH Ct. MWarma IFC3300 CITY-ST-ZIP ☐ Addition ☐ Change ☐ Delete TITLE TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Change ☐ Addition ☐ Delete TITLE TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP Change Addition ☐ Delete TITLE TITLE NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Change Addition TITLE TITLE ☐ Delete NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP 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 of, Florida Statutes; and that my name appears in Block 11 or Block 12 if