

2002 UNIFORM BUSINESS REPORT (UBR)

1/ **FILED**
Apr 01, 2002 8:00 am
Secretary of State

01-23-2002 90063 013 ***150.00

DOCUMENT # P010Q0067932

1. Entity Name
J & H ORLANDO, INC.

Principal Place of Business

**7741 SUNDIAL LANE
 ORLANDO FL 32919**

Mailing Address

**7741 SUNDIAL LANE
 ORLANDO FL 32919**

2. Principal Place of Business

2607 N.O.B.T.

3. Mailing Address

Suite, Apt. #, etc.



DO NOT WRITE IN THIS SPACE

City & State

2607 N.O.B.T., FL.

City & State

4. FEI Number

59-3729995

Applied For

Not Applicable

Zip

FL 32199

Country

ORANGE

Zip

Country

5. Certificate of Status Desired ☐

**\$8.75 Additional
 Fee Required**

6. Name and Address of Current Registered Agent

PATEL, JAYESH

**1675 RACHELS RIDGE LOOP
 OCOEE FL 34761**

7. Name and Address of New Registered Agent

Name **HARISH SHAM**

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

7741 SUNDIAL LANE

City

ORLANDO

FL

Zip Code
32819

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

[Signature]

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

(NOTE: Registered Agent signature required when reinstating)

DATE

1/6/02

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
 Trust Fund Contribution. ☐

**\$5.00 May Be
 Added to Fees**

11. OFFICERS AND DIRECTORS

TITLE **PD** ☐ Delete
 NAME **SHAH, HARISH**
 STREET ADDRESS **7741 SUNDIAL LANE**
 CITY-ST-ZIP **ORLANDO FL 32919**

TITLE **SD** ☒ Delete
 NAME **PATEL, JAYESH**
 STREET ADDRESS **1675 RACHELS RIDGE LOOP**
 CITY-ST-ZIP **OCOEE FL 34761**

TITLE ☐ Delete
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE ☐ Delete
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE ☐ Delete
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE ☐ Delete
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE ☐ Change ☐ Addition
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE **SD** ☒ Change ☐ Addition
 NAME **HARISH SHAM**
 STREET ADDRESS **7741 SUNDIAL LANE**
 CITY-ST-ZIP **ORLANDO, FL 32819**

TITLE ☐ Change ☐ Addition
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
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TITLE ☐ Change ☐ 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:

[Signature]

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

1/6/02

Date

407-948-0521

Daytime Phone #

CR2E034 (9/01)