

2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

FILED
Sep 02, 2003 8:00 am
Secretary of State

09-02-2003 90181 036 ***550.00

DOCUMENT # P01000101195

1. Entity Name
PREMIER ENTERPRISES, INC.



Principal Place of Business
~~266 WILSHIRE BLVD.~~
SUITE 127
CASSELBERRY FL 32707

Mailing Address
~~266 WILSHIRE BLVD.~~
SUITE 127
CASSELBERRY FL 32707



2. Principal Place of Business

238 WILSHIRE BLVD
SUITE 149

3. Mailing Address

238 WILSHIRE BLVD
SUITE 149

☐ CHECK HERE IF MAKING CHANGES

City & State
CASSELBERRY FL
Zip 32707
Country USA

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CASSELBERRY FL
Zip 32707
Country USA

4. FEI Number **NOT APPLICABLE**
51-0448834

Applied For
Not Applicable

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

6. Name and Address of Current Registered Agent

SRIVASTAVA, MANJU
266 WILSHIRE BLVD.
SUITE 127
CASSELBERRY FL 32707

7. Name and Address of New Registered Agent

Name
SRIVASTAVA, MANJU
Street Address (P.O. Box Number is Not Acceptable)
238 WILSHIRE BLVD
SUITE 149
City **CASSELBERRY** **FL** **Zip Code** **32707**

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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE Manju Srivastava

08/27/03

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

(NOTE: Registered Agent signature required when reinstalling)

DATE

FILE NOW!!! FEE IS \$550.00
After September 10, 2003 Fee will be \$750.00
Make Check Payable to Florida Department of State

9. Election Campaign Financing ☐ **\$5.00 May Be Added to Fees**

10. OFFICERS AND DIRECTORS

TITLE	NAME	STREET ADDRESS	CITY - ST - ZIP	<input type="checkbox"/> Delete
DP	SRIVASTAVA, MANJU	266 WILSHIRE BLVD., STE 127	CASSELBERRY FL 32707	<input type="checkbox"/>
DST	SRIVASTAVA, PREM N	266 WILSHIRE BLVD., STE 127	CASSELBERRY FL 32707	<input type="checkbox"/>
D	SRIVASTAVA, PRASHANT	266 WILSHIRE BLVD., STE 127	CASSELBERRY FL 32707	<input type="checkbox"/>
D	SRIVASTAVA, ASHIMA	266 WILSHIRE BLVD., STE 127	CASSELBERRY FL 32707	<input type="checkbox"/>
D	SRIVASTAVA, SUBHASH	266 WILSHIRE BLVD., STE 127	CASSELBERRY FL 32707	<input type="checkbox"/>
				<input type="checkbox"/>

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE	NAME	STREET ADDRESS	CITY - ST - ZIP	<input type="checkbox"/> Change	<input type="checkbox"/> Addition
DP	SRIVASTAVA, MANJU	238 WILSHIRE BLVD S-149	CASSELBERRY, FL 32707	<input type="checkbox"/>	<input type="checkbox"/>
DST	SRIVASTAVA, PREM N	238 WILSHIRE BLVD STE 149	CASSELBERRY, FL 32707	<input type="checkbox"/>	<input type="checkbox"/>
D	SRIVASTAVA, PRASHANT	238 WILSHIRE BLVD STE 149	CASSELBERRY, FL 32707	<input type="checkbox"/>	<input type="checkbox"/>
D	SRIVASTAVA, ASHIMA	238 WILSHIRE BLVD STE 149	CASSELBERRY, FL 32707	<input type="checkbox"/>	<input type="checkbox"/>
D	SRIVASTAVA, SUBHASH	238 WILSHIRE BLVD STE 149	CASSELBERRY, FL 32707	<input type="checkbox"/>	<input type="checkbox"/>
				<input type="checkbox"/>	<input type="checkbox"/>

12. 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

MANJU SRIVASTAVA

08/27/03

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E034 (4/03)