

2002 UNIFORM BUSINESS REPORT (UBR)

FILED
Jul 30, 2002 8:00 am
Secretary of State

07-30-2002 90383 036 ***150.00

DOCUMENT # P01000116383

1. Entity Name
PASSI INC.

Principal Place of Business

2794 TEWNIS CLUB #202
 WEST PALM BEACH FL 33417

Mailing Address

2794 TEWNIS CLUB #202
 WEST PALM BEACH FL 33417

2. Principal Place of Business

7237 BRYAN DAIRY RD

Suite, Apt. #, etc.
LARGO, FLORIDA

City & State

3. Mailing Address

7237 BRYAN DAIRY RD

Suite, Apt. #, etc.
LARGO, FLORIDA

City & State

Zip
33777

Country

Zip
33777

Country

4. FEI Number

80-0006330

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
 Fee Required

6. Name and Address of Current Registered Agent

DELTA MECHANICAL INC.
7237 BRYAN DAIRY RD
LARGO FL 33777

7. Name and Address of New Registered Agent

Name

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

City

FL

Zip Code

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

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

(NOTE: Registered Agent signature required when reinstating)

DATE

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 \$550.00
After September 13, 2002 Fee will be \$750.00
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

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE **D** ☐ Delete
 NAME **PASSI, NATAN**
 STREET ADDRESS **2794 TEWNIS CLUB #202**
 CITY-ST-ZIP **WEST PALM BEACH FL 33417**

TITLE **D** ☒ Change ☐ Addition
 NAME **PASSI, NATAN**
 STREET ADDRESS **1101 ESTERS RD. # 1723**
 CITY-ST-ZIP **IRVING, TX 75061**

TITLE ☐ Delete
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

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

TITLE ☐ Delete
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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 REQUIRED

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

7/15/02

CR2E034 (4/02)

Attachment PO1000116383/676112

PASSI INC.,

7237 BRYAN DAIRY RD
LARGO, FL 33777
Your Address Line 3
Your Address Line 4

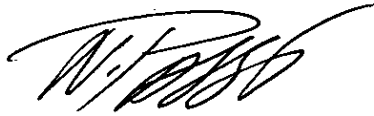
Phone: 727-545-7957
Fax: 727-545-7937
Email: pnpassi@aol.com

To whom it may concern,

This letter is to inform you that Passi Inc., did not receive a prior notice for filing a Uniform Business Report and requests the penalty fee to be waived. This could have happened because of a mistake in the mailing address which is 2794 TENNIS CLUB DR. and not 2794 TEWNIS CLUB as written on the report I received on 7/12/02.

Thank you

Natan Passi—DIRECTOR



7/15/02