

# **2014 FOR PROFIT CORPORATION REINSTATEMENT**

DOCUMENT# P02000010027

Entity Name: MATHAI INC.

**FILED**  
**Jan 03, 2014**  
**Secretary of State**

## **Current Principal Place of Business:**

742 NEW JERSEY ST  
WEST PALM BEACH, FL 33401

## **New Principal Place of Business:**

742 NEW JERSEY ST  
OPTIONAL  
WEST PALM BEACH, FL 33401 UN

## **Current Mailing Address:**

281 BRIELLE AVE  
STATEN ISLAND, NY 10314

## **New Mailing Address:**

FEI Number: 37-1419388      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired (X)

## **Name and Address of Current Registered Agent:**

VARUGHESE, SHIBU  
742 NEW JERSEY ST.  
WEST PALM BEACH, FL 33401 US

## **Name and Address of New Registered Agent:**

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: SHIBU VARUGHESE

Electronic Signature of Registered Agent

Date

## **OFFICERS AND DIRECTORS:**

Title: PD  
Name: MATHAI, VARUGHESE  
Address: 281 BRIELLE AVE  
City-St-Zip: STATEN ISLAND, NY 10314

Title: V  
Name: VARUGHESE, SHIBU  
Address: 742 NEW JERSEY STREET  
City-St-Zip: WEST PALM BEACH, FL 33401

Title: PD  
Name: MATHAI, VARUGHESE  
Address: 281-BRIELLE AVE  
City-St-Zip: STATEN ISLAND, NY 10314

Title: T  
Name: MATHAI, BABLI  
Address: 281- BRIELLE AVE  
City-St-Zip: STATEN ISLAND, NY 10314

I hereby certify that the information indicated on this report or supplemental report is true and accurate and that my electronic 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 above, or on an attachment with all other like empowered.

SIGNATURE: VARUGHESE MATHAI

PD

01/03/2014

Electronic Signature of Signing Officer or Director

Date