

FILED
Apr 11, 2005 8:00 am
Secretary of State

03-16-2005 90034 020 ***150.00

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FOR PROFIT CORPORATION
UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # PO 20000090788

1. Entity Name

AMAR NATH, INC

DO NOT WRITE IN THIS SPACE

66009212

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business
1200 S MAIN STREET

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State
WILDWOOD, FL

City & State

4. FEI Number
01-0742000

Applied For
Not Applicable

Zip
34785

Country

Zip

Country

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

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IN THIS SPACE

7. Name and Address of Current Registered Agent

Name

ARJUN MAHAJAN

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

1200 S MAIN ST

City

WILDWOOD

FL

Zip Code
34785

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

January 1 - May 1 Fee is \$150.00

After May 1, Fee is \$550.00

Amended UBR is \$61.25

Make Check Payable to Florida Department of State

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

10. OFFICERS AND DIRECTORS

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
PRESIDENT
ARJUN N MAHAJAN
1200 S MAIN ST
WILDWOOD FL 34785

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
V PRES
PAVEEN MAHAJAN
1200 S MAIN ST
WILDWOOD FL 34785

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12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(l), 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 on an attachment with an address, with all other like empowered.

SIGNATURE:

Arjun Mahajan PRESIDENT

3/9/2005

352-748-0132

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #