2003 FOR PROFIT CORPORATION

Mar 10, 2003 8:00 am Secretary of State UNIFORM BUSINESS REPORT (UBR) P02000110800 DOCUMENT # 1. Entity Name 03-10-2003 90109 011 ***150 00 MTC ELLIOTT INTERNATIONAL, INC. Principal Place of Business Mailing Address 266 WILSHIRE BOULEVARD 266 WILSHIRE BOULEVARD **SUITE 127 SUITE 127** CASSELBERRY FL 32707 CASSELBERRY FL 32707 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. ☐ CHECK HERE IF MAKING CHANGES City & State City & State Applied For 4. FEI Number Not Applicable Zip Country Zip Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Name JOSHI, SURENDRA M Street Address (P.O. Box Number is Not Acceptable) 266 WILSHIRE BOULEVARD SUITE 127 CASSELBERRY FL 32707 City 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 FILE NOW!!! FEE IS \$150.00 9. Election Campaign Financing \$5.00 May Be After May 1, 2003 Fee will be \$550.00 Trust Fund Contribution. Make Check Payable to Florida Department of State Added to Fees 10. OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 11. TITLE ☐ Delete TITLE ☐ Change ☐ Addition JOSHI, SURENDRA M NAME NAME 266 WILSHIRE BLVD. #127 STREET ADDRESS STREET ADDRESS CASSELBERRY FL 32707 CITY-ST-ZIP STD TITLE ☐ Delete Change ☐ Addition NAME JOSHI, PURNIMA S NAME STREET ADDRESS 266 WILSHIRE BLVD. #127 STREET ADDRESS CITY-ST-ZIP CASSELBERRY FL 32707 CITY-ST-ZIP TITLE Delete TITLE ☐ Change Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE Delete TITLE ☐ Change Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-7IP CITY-ST-ZIP TITLE ☐ Delete TITLE ☐ Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE ☐ Delete TITLE Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(1), 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.

CITY-ST-ZIP

SIGNATURE:

CITY-ST-ZIP

Feb, 20 2003

FILED

ATTACHMENT

MTC ELLIOTT INTERNATIONAL, INC

March 1, 2003

The Director, Division of Corporations, Florida Department Of State, P.O.Box 6327. Tallahassee, Florida 32314, U.S.A.

10034591 P02000110800

Dear Sir or Madam:

To,

The Director, Division of Corporations, Florida Department Of State, P.O.Box 6327, Tallahassee, Florida 32314, U.S.A.

Dear Sir,

Re: Filing Of Uniform Business Report, 2003.

We herewith submit Uniform Business Report 2003 for Our company "MTC ELLIOTT INTERNATIONAL, INC.266, WILLSHIRE BOULEVARD, SUITE 127, CASSELBERRY, FL 32307 in prescribed form along with Filing fees of U.S.\$ 150/- (US. \$ One Hundred Fifty only) by cheque/draft no.19874 dated 25/2/2003 drawn on Habib American Bank, Newyork drawn in your

Please acknowledge the receipt thereof.

Yours truly.

President.

Enc: cos abour