2005 FOR PROFIT CORPORATION **UNIFORM BUSINESS REPORT (UBB)**

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DOCUMENT # P04000086180					2005 OCT -6 PM 3: 53	
1. Entity Name				1	SECRETARY OF S	STATE
MP VORA INC					TALLAHASSEE, FLORIDA	
DO N	OT WRIT	TE IN THIS	SPA	CE		
2. Principal Place of Business 380 SR 434		3. Mailing Address 77-A E. LINCOLN AVE				
Suite, Apt. #, etc.		Suite, Apt. #, etc.		DO NOT WRITE IN THIS SPACE		
City & State ALTAMONTE SPRINGS, FL		City & State HATFIELD, PA			4. FEI Number 20-1028815	Applied For Not Applicable
Zip 32817	Country	Zip 19440-2540	С	ountry	5. Certificate of Status Desired	\$8.75 Additional Fee Required
					ne and Address of Current Regist	tered Agent
				Name VORA, PANKAJ K		
DO NOT WRITE			, ign ,		ress (P.O. Box Number is Not Acce	otable)
	N THIS S	PACE	٠.	4231 SAND H		· · · · · · · · · · · · · · · · · · ·
				City	FL	Zip Code
8. The above named	l entity submits this	s statement for the num	ose of c	ORLANDO	stered office or registered agent, or	32817
State of Florida. I	am familiar with, a	nd accept the obligation	ns of regi	istered agent.	stered office of registered agent, or	boat, in the
SIGNATURE	anki 1/0	PRES	IDENT			4/18/2005
		me of registered agent and title		Ne. (NOTE: Regist	tered Agent signature required when reinstatir	
January 1	- May 1 Fee is \$1	50.00				
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
Make Check Payabi	<u>e to Fiorida Depa</u> OFFICERS	S AND DIRECTORS	111.		<u> </u>	
TITLE	PRESIDENT	3 MAD DIRECTORS	# TO	TLE 1 1983	[Ma]:	10 (1)
NAME	VORA, PANKAJ			AME	·	
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12. I hereby certify that	the information supp	lied with this filing does no	t qualify f	or the exemption :	stated in Section 119.07(3)(i), Florida St	atutes. I further
certify that the inform	nation indicated on t	nis report or supplemental	report is	true and accurate	and that my signature shall have the sa tee empowered to execute this report as	me legal effect
					tee empowered to execute this report as	

PRESIDENT
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Daytime Phone #

4/18/2005

MP VORA INC.

77-A E.LINCOLN AVE HATFIELD, PA 19440 (215)368-6690 Fax: (215)368-6542

: FAX COVER SHEET :

FAX NUMBER TRANSMITTED TO:(850)245-6017

To:

Mr. Andy Dunlap

Of:

Florida Division of Corporation

From:

UDAY S. SHAH

Client/Matter:

2005 Annual Report (Document# P04000086180)

Date:

October 6th, 2005.

DOCUMENTS

NUMBER OF PAGES*

COMMENTS:

Dear Mr. Andy Dunlap,

As per our today's telephone conversation, I would like to inform you that we did file our Annual Report for the tax year of 2005, on April 18th, 2005, along with a check of \$150.00, but, somehow, you received it late, so, I am requesting you to consider this situation and adjust our account accordingly.

If you have any questions, please feel free to call me.

Sincerely.

Uday S. Shah

Uday S. Shah

Accountants and Tax Consultants



[•] NOT COUNTING COVER SHEET. IF YOU DO NOT RECEIVE <u>ALL PAGES. PLEASE TELEPHONE US IMMEDIATELY AT (215)368-6690.</u>