

**2001 UNIFORM BUSINESS REPORT (UBR)****DOCUMENT # P17822**1. Entity Name  
**PARARA SERVICES, INC.****FILED**  
**Apr 13, 2001 8:00 am**  
**Secretary of State**

04-13-2001 90030 004 \*\*\*150.00

0446331

Principal Place of Business  
**110 W RICH AVE  
SUITE C  
DELAND FL 32720  
US**Mailing Address  
**8601 DUNWOODY PL STE 446  
ATLANTA GA 30350**

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business

**230 N. WOODLAND BLVD.**

3. Mailing Address

Suite, Apt. #, etc.

**SUITE 305**

City &amp; State

**DELAND FL**

City &amp; State

Zip

**32720**

Country

**USA**

Zip

Country

4. FEI Number **58-1762446**

Applied For

Not Applicable

5. Certificate of Status Desired ☐**\$8.75** Additional  
Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

**CT CORPORATION SYSTEM  
1200 S. PINE ISLAND ROAD  
PLANTATION FL 33324**

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.

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 \$150.00**  
**After MAY 1, 2001 Fee will be \$550.00**  
**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	NAME	STREET ADDRESS	CITY-ST-ZIP		TITLE	NAME	STREET ADDRESS	CITY-ST-ZIP	
	PTD			<input type="checkbox"/> Delete					<input type="checkbox"/> Change <input type="checkbox"/> Addition
	HARDMAN, JOSEPH E.	110 W RICH AVE	DELAND FL						
	VSD			<input type="checkbox"/> Delete					<input type="checkbox"/> Change <input type="checkbox"/> Addition
	MOORE, CHARLES	8601 DUNWOODY PL 446	ATLANTA GA						
	WU, JERRY S	8601 DUNWOODY PL, 446	ATLANTA G 30350	<input type="checkbox"/> Delete					<input type="checkbox"/> Change <input type="checkbox"/> Addition
				<input type="checkbox"/> Delete					<input type="checkbox"/> Change <input type="checkbox"/> Addition
				<input type="checkbox"/> Delete					<input type="checkbox"/> Change <input type="checkbox"/> Addition
				<input type="checkbox"/> Delete					<input type="checkbox"/> Change <input type="checkbox"/> Addition
				<input type="checkbox"/> Delete					<input type="checkbox"/> Change <input type="checkbox"/> Addition

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:

**JERRY S. WU**

04-10-2001

Date

770-641-7993

Daytime Phone #

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

CR2E034 (10/00)