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PROFIT
CORPORATION
ANNUAL REPORT
1996



FLORIDA DEPARTMENT OF STATE
Sandra B. Morham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # **P40310** (5)

1. Corporation Name

UBEROI INTERNATIONAL, INC.



Principal Place of Business

**314 COMMONS WAY
PRINCETON NJ 08540
US**

Mailing Address

**314 COMMONS WAY
PRINCETON NJ 08540
US**

3. Date Incorporated or Qualified
09/02/1992

3a. Date of Last Report
05/01/1995

2. Principal Place of Business

2a. Mailing Address

21

26

Suite, Apt. #, etc.

Suite, Apt. #, etc.

22

27

City & State

City & State

23

28

Zip

Country

Zip

Country

24

25

29

30

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

**MINTZ, KAREN MS.
2240 WOOLBRIGHT RD.
SUITE 315
BOYNTON BCH. FL 33436**

81 Name

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

83

84 City

FL

85 Zip Code

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE

Signature of Registered Agent (Typed Name and Title)

Signature of Registered Agent (Typed Name and Title)

DATE

12. OFFICERS AND DIRECTORS

TITLE	C	☐ DELETE
NAME	UBEROI, MADHU	
STREET ADDRESS	314 COMMONS WAY	
CITY- ST- ZIP	PRINCETON NJ 08540	
TITLE	VCP	☐ DELETE
NAME	UBEROI, MAHESH	
STREET ADDRESS	314 COMMONS WAY	
CITY- ST- ZIP	PRINCETON NJ 08540	
TITLE	V	☐ DELETE
NAME	ANBARASAN, SIVARAMAN	
STREET ADDRESS	314 COMMONS WAY	
CITY- ST- ZIP	PRINCETON NJ 08540	
TITLE	ST	☐ DELETE
NAME	UBEROI, MADHU	
STREET ADDRESS	314 COMMONS WAY	
CITY- ST- ZIP	PRINCETON NJ	
TITLE		☐ DELETE
NAME		
STREET ADDRESS		
CITY- ST- ZIP		
TITLE		☐ DELETE
NAME		
STREET ADDRESS		
CITY- ST- ZIP		

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1. TITLE	☐ Change ☐ Addition
12 NAME	
13 STREET ADDRESS	
14 CITY- ST- ZIP	
2. TITLE	☐ Change ☐ Addition
22 NAME	
23 STREET ADDRESS	
24 CITY- ST- ZIP	
3. TITLE	☐ Change ☐ Addition
32 NAME	
33 STREET ADDRESS	
34 CITY- ST- ZIP	
4. TITLE	☐ Change ☐ Addition
42 NAME	
43 STREET ADDRESS	
44 CITY- ST- ZIP	
5. TITLE	☐ Change ☐ Addition
52 NAME	
53 STREET ADDRESS	
54 CITY- ST- ZIP	
6. TITLE	☐ Change ☐ Addition
62 NAME	
63 STREET ADDRESS	
64 CITY- ST- ZIP	

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*****200.00**

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(g), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual 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 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE: *S. Anbarasan* - S. Anbarasan - Vice President 4/15/96

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

DATE

Day, Date, State

CR2E034 (12/95)