P92000014599

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
03 JUN 25 PM 1:47

2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P92000014599

1. Entity Name
MAUR'S INC.

100021131071
06/25/03--01024--011 **550.00

Principal Place of Business	Mailing Address
18696 B PINE ISLAND N PLANTATION, FL 33322 US	18696 B PINE ISLAND N PLANTATION, FL 33322 US

2. Principal Place of Business	3. Mailing Address
1355 SE 17 ST	5463 NW 89 WA
Suite, Apt. #, etc.	Suite, Apt. #, etc.
City & State: FT. LAUDERDALE	City & State: CORAL SPRINGS
Zip: 33316 Country: USA	Zip: FL Country: 33067

☐ CHECK HERE IF MAKING CHANGES

4. FEI Number: 65-0380447 ☐ Applied For ☐ Not Applicable

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

6. Name and Address of Current Registered Agent

PATEL, RANJI
18696 B PINE ISLAND N
PLANTATION, FL 33322

7. Name and Address of New Registered Agent

Name

Street Address (P.O. Box Number is Not Acceptable) 5463 NW 89 WA

City CORAL SPG FL Zip Code 33067

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 _____ DATE
Signature, typed or printed name of registered agent and title if applicable (MORE: Registered Agent signature required when amending)

FILING FEE $ 150.00
After May 1, 2003 the fee will be $500.00
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			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D PATEL, RANJITSHINH 1869 B PINE ISLAND RD PLANTATION, FL 33322	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	P PATEL, MAUKUMAR 1869 B PINE ISLAND RD PLANTATION, FL 33322	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	V.P MITABEN PATEL 5463 NW 89 WAL CORAL SPG FL 33067	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ Change ☐ Addition
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CR2E034 (10/02)

12. 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: _____ 6/10/03 954 600 9900
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #