

2000 UNIFORM BUSINESS REPORT (UBR)

FILED
Sep 12, 2000 8:00 am
Secretary of State
 09-12-2000 90017 028 ***150.00

DOCUMENT # P93000086774

1. Entity Name
AUM SHREE, INC.

R

Principal Place of Business
EZ WAY FOOD & BEVERAGE
2401 E. GRAVES AVE., #2
ORANGE CITY FL 32763

Mailing Address
2884 FOREST EDGE DR.
DELTONA FL 32720



DO NOT WRITE IN THIS SPACE

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

4. FEI Number **59-3214607**

Applied For
 Not Applicable

Zip Country

Zip Country

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

SHUKLA, ALKA V
2884 FOREST EDGE DR.
DELTONA FL 32725

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

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 \$550.00
After SEPTEMBER 13, 2000 Min. will be \$750.00
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	PD SHUKLA, VINAY C 2884 FOREST EDGE DR. DELTONA FL 32725	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VSTD SHUKLA, ALKA V 2884 FOREST-EDGE DR. DELTONA FL 32725	<input type="checkbox"/> Delete
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TITLE NAME STREET ADDRESS CITY-ST-ZIP		<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: *Shukla Vinay C* **9-8-00** **907-775-4033**
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

CR2E034 (5/00)

attachment
P93000086774
B0106023

AUM SHREE, INC.
2401 E. GRAVES AVE. #2
ORANGE CITY, FL. 32763
(904) 775- 4033

Sept.07, 2000

To. Secretary of State
Division of Corporation
P.O. Box 6327

Reference: Document # P93000086774, E-Z Way Food & Beverage.
EIN:- 59-3214607

Subject:- Waiver of Penalty.

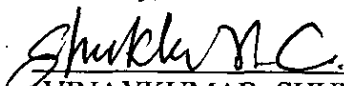
Dear Sir/Madam,

With reference to above, I undersigned Vinaykumar Shukla, president of Aum Shree, Inc. would like to request you to waive the penalty for non-payment of annual Filing Fees for 2000 on the following grounds.

I never received the Annual Filing Form for 2000, may be lost in the mail and /or delivered back to you, which was not forwarded to us. Unfortunatley, I never realized that I didnot pay the annual filing fee for 2000 as I did not received the Filing Form for 2000. I would like to request you to waive the penalty on the basis of lack of knowledge and misunderstandings, Untill now, we filed and paid annual fees on or before due dates, as it was received by us before May 2000, as it was not received before that. Please waive the penalty, due to lack of information.

As discussed with one of your representative, about the waiver of penalty, I am enclosing herewith the check of \$150.00 being an annual filing fee for 2000 as an exceptional case. I assure you that this is not going to happen in the future, If I will receive the Form on or before due date. Please waive the penalty on the basis of lack of knowledge, misunderstanding. Thanking you in advance for your cooperation. Sorry for the inconvenience that caused to you.

Sincerely,


(VINAYKUMAR SHUKLA)
PRESIDENT OF CORP.