

2002 UNIFORM BUSINESS REPORT (UBR)

3/

FILED
Apr 21, 2002 8:00 am
Secretary of State

03-26-2002 90081 005 ***150.00

DOCUMENT # P94000024664

1. Entity Name

SARASWATI, INC.

Principal Place of Business

**5778 CLARK ROAD
SARASOTA FL 34233**

Mailing Address

**5778 CLARK ROAD
SARASOTA FL 34233**

2. Principal Place of Business

5774 Clark Rd.

Suite, Apt. #, etc.

3. Mailing Address

5774 Clark Rd.

Suite, Apt. #, etc.

City & State

Sarasota

City & State

Sarasota

Zip

FL

Country

34233

Zip

FL

Country

34233

4. FEI Number

65-0477577

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

**PATEL, SONMUCHLAL L
4800 N TAMiami TRAIL
SARASOTA FL 34234**

7. Name and Address of New Registered Agent

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 fee 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, 2002 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

TITLE	S	<input type="checkbox"/> Delete
NAME	PATEL, RAMILA S	
STREET ADDRESS	4800 N TAMiami TRAIL	
CITY-ST-ZIP	SARASOTA FL 34238	
TITLE	VT	<input type="checkbox"/> Delete
NAME	PATEL, ANANTKUMAR R	
STREET ADDRESS	8727 14TH ST W	
CITY-ST-ZIP	BRADENTON FL 34207	
TITLE	V	<input type="checkbox"/> Delete
NAME	PATEL, MAHENDRAKUMAR	
STREET ADDRESS	20 RIO VISTA RD	
CITY-ST-ZIP	ARCADIA FL 33821	
TITLE	V	<input type="checkbox"/> Delete
NAME	PATEL, RITA M	
STREET ADDRESS	20 RIO VISTA RD	
CITY-ST-ZIP	ARCADIA FL 33821	
TITLE	P	<input type="checkbox"/> Delete
NAME	PATEL, SONMUCHLAL	
STREET ADDRESS	4800 N TAMiami TR	
CITY-ST-ZIP	SARASOTA FL 34234	
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4/6/02 **941 921-7750**

Daytime Phone #

CR2E034 (9/01)