PROFIT CORPORATION ANNUAL REPORT 1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State **DIVISION OF CORPORATIONS**

DOCUMENT # P9400038062

1. Corporation Name

PUNJAB RESTAURANT I, INC.

May 05, 1999 8:00 am Secretary of State

05-05-1999 90131 033 ***150.00



Principal Place of Business Mailing Address				_		
5975 NORTH FEDERAL HIGHWAY 5975 NORTH FEDERAL HIGHW			ΙΑΥ			
FORT LAUDERDALE FL 33308		FORT LAUDERDALE FL 33308			TO LIGHT IN THE PRACE	
					DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualifed	
,			.=		05/20/1994	
2. Principal Place of Business 2a. Mailing Address					4. FEI Number Applied For	
21	26			65-0502401 Not Applicable		
Suite, Apt. #, etc.		Suite, Apt. #, etc.			5. Certificate of Status Desired	
City & State		City & State			6. Election Campaign Financing \$5.00 May Be	
23		Zip Country			Trust Fund Contribution Added to Fees	
Zip	·		¬ ´	,	8. This corporation owes the current year Intangible Personal Property Tax.	
24	25 9. Name and Address of Current	29 30	<u>'I </u>		10. Name and Address of New Registered Agent	
	9. Name and Address of Content	Registered Agent	81	Name	10, 11	
PERLOW, JEFFREY M			82		Library (D.O. Davidson Landson Accordable)	
	S. HALLANDALE BEACH BLVD.			Street A	ddress (P.O. Box Number is Not Acceptable)	
HALLANDALE FL 33009				 		
			84	City	FL 85 Zip Code	
44 Pureuant	to the provisions of Sections 607 0502	and 607.1508. Florida Statutes	the abov	e-named c	corporation submits this statement for the purpose of changing its registered	
l office or n	egistered agent, or both, in the State of familiar with, and accept the obligation	if Florida. Such change was autho	orized by	the corpor	ration's board of directors. I hereby accept the appointment as registered	
SIGNATURE	Signature, typed or printed name of registered agent	and title if applicable (NOTE: Re-	nistered Ace	ot signature rec	quired when reinstating) DATE	
12.	OFFICERS AND		13.		ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	Р	☐ DELETE	1.1 TITLE		☐ Change ☐ Addition	
NAME	SINGH, RAMJIT		1.2 NAME			
STREET ADDRESS	1801 E. FEDERAL HIGHWAY		1.3 STREE	TADDRESS		
CITY-ST-ZIP	BOCA RATON FL 33432		1.4 CITY-ST-ZIP			
TITLE	P	☐ DELETE	2.1 TITLE		☐ Change ☐ Addition	
NAME	SINGH, TARSAM K		2.2 NAME			
STREET ADDRESS	1801 E. FEDERAL HIGHWAY		2.3 STREE	T ADDRESS		
CITY-ST-ZIP			2. 4 CITY-	ST-ZIP		
TITLE		DELETE	3.1 TITLE		☐ Change ☐ Addition	
NAME	È		3.2 NAME	Ì		
STREET ADDRESS				TADDRESS		
CITY-ST-ZIP	· · ·	Delete	3.4. CITY-	ST-ZIP	Change Addition	
TITLE		☐ DELETE	4.1 TITLE	i	_ Sharingt _ Sharingt	
NAME			4. 2 NAME			
STREET ADDRESS				TADDRESS		
Crty-st-zip		☐ DELETE	4.4 CITY-S 5.1 TITLE	iT-ZIP	☐ Change ☐ Addition	
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NAME			ľ	TADORESS		
STREET ADDRESS			5.4 CITY-S	Ī		
CITY-ST-ZIP		☐ DELETE	6.1 TITLE	ப	☐ Change ☐ Addition	
TITLE		C) OCCUPA	6.2 NAME	Ì		
NAME				TADDRESS		
STREET ADDRESS			SAPIN S			

14. 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 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, with all other like empowered.

SIGNATURE: