

2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P94000052477

1. Entity Name

~~KOLAM CONSULTANTS, INC.~~

VISKARE CONSULTING, INC.

Principal Place of Business

6651 CUSTER STREET
HOLLYWOOD FL 33024

Mailing Address

5101 SW 173RD WAY
FORT LAUDERDALE FL 33331-1138

2. Principal Place of Business

8201 PETERS RD

Suite, Apt. #, etc.

SUITE 1000

3. Mailing Address

P.O. BOX 811743

Suite, Apt. #, etc.



DO NOT WRITE IN THIS SPACE

City & State

PLANTATION, FL

Zip

33324

Country

USA

City & State

BOCA RATON, FL

Zip

33481

Country

USA

4. FEI Number

65-0508051

Applied For

Not Applicable

5. Certificate of Status Desired

☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

ANAGUR, VISWANATHAN
5101 SW 1783RD WAY
FT LAUDERDALE FL 33331

7. Name and Address of New Registered Agent

Name

KAREN L. KAYSER

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

5420 LYONS RD, #108

City

COCONUT CREEK

FL

Zip Code

33073

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

Karen L. Kayser

KAREN L. KAYSER

Signature, typed or printed name of registered agent and title 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, 2000 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 **P** ☒ Delete
NAME **ANAGUR, VISWANATHAN**
STREET ADDRESS **5101 SW 173RD WAY**
CITY-ST-ZIP **FT. LAUDERDALE FL 33331**

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE **PD** ☐ Change ☒ Addition
NAME **PADMA VISWANATHAN**
STREET ADDRESS **5101 SW 173RD WAY**
CITY-ST-ZIP **FT. LAUDERDALE FL 33331**

TITLE **VDT** ☐ Change ☒ Addition
NAME **KAREN L. KAYSER**
STREET ADDRESS **5420 LYONS RD, #108**
CITY-ST-ZIP **COCONUT CREEK, FL 33073**

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ 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:

Karen L. Kayser **KAREN L. KAYSER**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4/2/2000

Date

954-916-2640

Daytime Phone #

CR2E034 (9/99)