2000 UNIFORM BUSINESS REPORT (UBR)

FILED Feb 23, 2000 8:00 am Secretary of State DOCUMENT # **P9400070490** RAJ MATHUR CONSTRUCTION & ENGINEERING, INC. 02-23-2000 90026 048 ***150.00 Principal Place of Business Mailing Address 712-53RD AVENUE 712-53RD AVENUE E **BRADENTON FL 34203 BRADENTON FL 34203-5832** ひじひんせんひひ 2. Principal Place of Business 3. Mailing Address <u>53rb Ave West</u> 216 Suite, Apt. #, etc. Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE City & State City & State Applied For 4. FEI Number 65-0520573 Not Applicable Bradenton Bradenton Country Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 3412 Mahatee 34207-3 6. Name and Address of Current Registered Agent 34207-3<u>4207-341</u> Manatee 7. Name and Address of New Registered Agent FELDMAN, MARC H Street Address (P.O. Box Number is Not Acceptable) 3908 26TH ST W **BRADENTON FL 34205** Zip Code City FL 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 title if applicable (NOTE: Registered Agent signature required when reinstating) DATE FILE NOW!!! FEE IS \$150.00 9. This corporation is eligible to satisfy its Intangible 10. Election Campaign Financing \$5.00 May Be Tax filing requirement and elects to do so. After MAY 1, 2000 Fee will be \$550,00 Trust Fund Contribution. Added to Fees (See criteria on back) Make Check Payable to Department of State ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 11. OFFICERS AND DIRECTORS 12. ☐ Change ☐ Addition □ Delete TITLE NAME MATHUR, RAJENDRA K NAME STREET ADDRESS 4556 31ST CT E STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP **BRADENTON FL 34203** ☐ Addition ☐ Delete Change NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Change ☐ Addition TITLE ☐ Delete TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Delete Change ■ Addition TITLE TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP □ Change ☐ Addition ☐ Delete TITLE TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Change TITLE ☐ Delete TITLE ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP 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 supplier cotal 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 thustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 11 or Block 12 if

ah address, with all other like empowered.

changed, or on an attachment will

SIGNATURE: