

**2000 UNIFORM BUSINESS REPORT (UBR)****FILED****Apr 27, 2000 08:00 AM****Secretary of State****DOCUMENT # P95000024756**

1. Entity Name

TAMPA PROPERTIES, INC.

Principal Place of Business

26 ADALIA AVE.

TAMPA  
33606

FL

Mailing Address

26 ADALIA AVE.

TAMPA  
33606

FL

2. Principal Place of Business

24 ADALIA AVE.

3. Mailing Address

24 ADALIA AVE.

Suite, Apt. #, etc.

Suite, Apt. #, etc.

DO NOT WRITE IN THIS SPACE

City &amp; State

TAMPA

FL

City &amp; State

TAMPA

FL

4. FEI Number

59-3309370

Applied For

Not Applicable

Zip  
33606

Country

Zip  
33606

Country

5. Certificate of Status Desired ☐**\$8.75** Additional  
Fee Required**6. Name and Address of Current Registered Agent**RATTAN PAWAN K  
26 ADALIA AVENUETAMPA  
33606

FL

US

**7. Name and Address of New Registered Agent**

Name

RATTAN PAWAN K

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

24 ADALIA AVENUE

City  
TAMPA

FL

Zip Code  
33606

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 **PAWAN K. RATTAN**

Signature, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

**04/27/2000**

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 SD ☐ Delete  
NAME RATTAN VEENA  
STREET ADDRESS 26 ADALIA AVE.  
CITY-ST-ZIP TAMPA FL 33606TITLE PD ☐ Delete  
NAME RATTAN PAWAN K  
STREET ADDRESS 26 ADALIA AVE.  
CITY-ST-ZIP TAMPA FL 33606TITLE ☐ Delete  
NAME  
STREET ADDRESS  
CITY-ST-ZIPTITLE ☐ Delete  
NAME  
STREET ADDRESS  
CITY-ST-ZIPTITLE ☐ Delete  
NAME  
STREET ADDRESS  
CITY-ST-ZIPTITLE ☐ Delete  
NAME  
STREET ADDRESS  
CITY-ST-ZIP**12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11**TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIPTITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIPTITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIPTITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIPTITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIPTITLE ☐ 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: PAWAN K. RATTAN

PD

04/27/2000