

FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

DOCUMENT #

1. Entity Name

NADIA STEVEN CORPORATION

FILED

02 JUL 26 AM 11:54

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business

13902-2 Egret

Suite, Apt. #, etc.

TOWER - DRIVE

City & State

ORLANDO FL

Zip
32837

Country
ORANGE

3. Mailing Address

13902-2 Egret

Suite, Apt. #, etc.

TOWER DRIVE

City & State

ORLANDO FL

Zip
32837

Country
ORANGE

4. FEI Number

59-335-8976

Applied For

Not Applicable

5. Certificate of Status Desired

☐

\$8.75 Additional
Fee Required

7. Name and Address of Current Registered Agent

Name

Ramanand Persaud

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

5014 HOOK HOLLOW CIRCLE

City

ORLANDO

FL

Zip Code

32837

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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

9. This corporation is eligible to satisfy its intangible

Tax filing requirement and elects to do so.

(See criteria on back)

☐

January 1 - May 1 Fee is \$150.00

After May 1, Fee is \$550.00

Amended UBR is \$61.25

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
NAME
STREET ADDRESS
CITY - ST - ZIP
PRESIDENT
RAMANAND PERSAUD
5014 HOOK HOLLOW CIRCLE
ORLANDO FL 32837

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP
VICE - PRESIDENT
INDRANIL PERSAUD
5014 HOOK HOLLOW CIRCLE
ORLANDO FL 32837

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP
SECRETARY
VISHAL A. PERSAUD
5014 HOOK HOLLOW CIRCLE
ORLANDO FL 32837

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP
TREASURER
NANDA PERSAUD CHARRAN
5014 HOOK HOLLOW CIRCLE
ORLANDO FL 32837

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13. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(f), 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 on an attachment with an address, with all other like empowered.

SIGNATURE:

NANDA P. CHARRAN NANDA P. CHARRAN

4/27/02 407-528-3282
407-855-5445

CR2E0345 (12/01)