

**2000 UNIFORM BUSINESS REPORT (UBR)**

**FILED**  
**Sep 12, 2000 8:00 am**  
**Secretary of State**  
 09-12-2000 90016 019 \*\*\*150.00

**DOCUMENT # P95000062797**

1. Entity Name  
**MAVA INDUSTRIES, INC.**

*R*

Principal Place of Business      Mailing Address  
**935 SILVERTON LOOP**      **935 SILVERTON LOOP**  
**LAKE MARY FL 32746**      **LAKE MARY FL 32746**

0010598Z



DO NOT WRITE IN THIS SPACE

2. Principal Place of Business      3. Mailing Address

Suite, Apt. #, etc.      Suite, Apt. #, etc.

City & State      City & State

Zip      Country      Zip      Country

4. FEI Number **59-3331483**      Applied For  
 Not Applicable

5. Certificate of Status Desired  **\$8.75 Additional Fee Required**

**6. Name and Address of Current Registered Agent**

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

**BABBAR, AJAY**  
**935 SILVERTON LOOP**  
**LAKE MARY FL 32746**

Name  
 Street Address (P.O. Box Number is Not Acceptable)  
 City      **FL**      Zip Code

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 \_\_\_\_\_ DATE \_\_\_\_\_  
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

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 \$550.00**  
**After SEPTEMBER 13, 2000 Min. will be \$750.00**  
**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**

**12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11**

11. OFFICERS AND DIRECTORS		12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE	<input type="checkbox"/> Delete	TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME <b>D</b> <b>BABBAR, AJAY</b>		NAME	
STREET ADDRESS <b>935 SILVERTON LOOP</b>		STREET ADDRESS	
CITY-ST-ZIP <b>LAKE MARY FL 32746</b>		CITY-ST-ZIP	
TITLE	<input type="checkbox"/> Delete	TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME <b>D</b> <b>BABBAR, MANJU</b>		NAME	
STREET ADDRESS <b>935 SILVERTON LOOP</b>		STREET ADDRESS	
CITY-ST-ZIP <b>LAKE MARY FL 32746</b>		CITY-ST-ZIP	
TITLE	<input type="checkbox"/> Delete	TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		NAME	
STREET ADDRESS		STREET ADDRESS	
CITY-ST-ZIP		CITY-ST-ZIP	
TITLE	<input type="checkbox"/> Delete	TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		NAME	
STREET ADDRESS		STREET ADDRESS	
CITY-ST-ZIP		CITY-ST-ZIP	
TITLE	<input type="checkbox"/> Delete	TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		NAME	
STREET ADDRESS		STREET ADDRESS	
CITY-ST-ZIP		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: *Ajay Babbar* **THE RAJAYI BABBAR**  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

**8-SEP-2000**      **407-696-1377**  
Date      Daytime Phone #

CR2E034 (5/00)

attachment  
P9500062797

80  
B010S982

MAVA INDUSTRIES, INC.  
935 SILVERTON LOOP  
LAKE MARY, FL 32746

September 8, 2000

Fl. Dept. of State  
Division of Corporation, Uniform Business Report Filings  
P.O. Box 1500  
Tallahassee, Fl 32302-1500

Dear Sir/Madam:

Please be advised that the review of our records indicate that we were not in receipt of the Annual Corporate Renewal Form from your office. Upon discussion with your office, and with their suggestion, we enclose the copy of the form 2000 Uniform Business Report with the check in the amount of \$ 150.00.

Kindly accept our report and waive any penalties associated with such filing. Your uppermost attention to this matter is appreciated.

Sincerely,



Ajay Babbar, President