2000 UNIFORM BUSINESS REPORT (UBR)

FILED Jan 12, 2000 8:00 am DOCUMENT # **P95000070535 Secretary of State** 1. Entity Name KENEIL CORPORATION 01-12-2000 90007 042 ***150.00 Principal Place of Business Mailing Address %RAJESH SHAH CITY DISCOUNT BEVERAGE 6630 JUPITER GARD, BLVD. #E 9260 W. INDIANTOWN ROAD. BAY #4 JUPITER FL 33478 JUPITER FL 33458-6018 2. Principal Place of Business 3. Mailing Address Discourt Beverage DO NOT WRITE IN THIS SPACE Suite, Apt. #, etc. Suite, Apt. #, etc. 9260, w. Indiandown Road Applied For City & State City & State 4. FEI Number 65-0604519 Not Applicable Jupitor Country \$8.75 Additional Zip Country 5. Certificate of Status Desired Fee Required <u> ሜ</u>ጓዛገጸ USA 7. Name and Address of New Registered Agent 6. Name and Address of Current Registered Agent Name -SHAH, RAJESH Street Address (P.O. Box Number is Not Acceptable) 6630 JUPITER GARDENS BLVD #E JUPITER FL 33458 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 . (NOTE, Registered Agent signature required when reinstating) Signature, typed or printed name of registered agent and title if applicable. •9. This corporation is eligible to satisfy its Intangible FILE NOW!!! FEE IS \$150.00 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. TITLE Change ☐ Addition TITLE Delete SHAH, RAJESH NAME NAME STREET ADDRESS 6630 JUPIER GARDENS BLVD #E STREET ADDRESS CITY-ST-ZIP JUPITER FL 33458 CITY-ST-7/P Change ☐ Addition TITLE TITLE Delete NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP Change ☐ Addition ☐ Delete TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-7IP Change ☐ Addition TITLE TITLE Delete 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 Addition ☐ Delete TITLE TITLE 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 Statutés: Lurther 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:

Rojedin Shoh SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR