2003 FOR PROFIT CORPORATION

UNIFORM BUSINESS REPORT (UBR)

DOCUMENT #

P95000087835

1. Entity Name

VIRK ENTERPRISE, INC.



FILED Mar 19, 2003 8:00 am Secretary of State

03-19-2003 90128 014 ***150.00

| Principal Place of Business 7211 GARDNER STREET WINTER PARK FL 32792 US | | | 2268 CATBRIAR AWY OVIEDO FL 32765 | | | | | | |
|---|--|---------------------------------------|--------------------------------------|---------------------------|---------------------------------------|--|-------------------|---|--|
| 2. Principal Place of Business | | 3. Mailing Address | | | 1 | | | 8 111 5 1 3 111 1 15 1 | |
| Suite, Apt. #, etc. | | Suite, Apt. #, etc. | | | | CHECK HERE IF MAKING CHANGES | | | |
| City & State | | City & State | City & State | | | 4. FEI Number 59-3346671 Applied For Not Applied by | | | |
| Zip | Country | Zip | Coun | itry | 5 . C | Certificate of Status Desired | \$8.75 Ad | iditional | |
| | 6. Name and Address of Curre | ent Registered Agent | | L | 7. N | lame and Address of New Registered | | | |
| | The Market St. St. St. St. | | Name | | | the second secon | | | |
| • | KHWINDER S | | Street Addre | | s (P.O. Box Number is Not Acceptable) | | | | |
| 2268 CAT | BRIAR WAY | | | | | | | | |
| OVIEDO F | L 32765 | | | | | | | | |
| | | | | City | | F | Zip Cod | e et | |
| 0 The | | | | | | - | | | |
| the obligat | named entity submits this statement tions of registered agent. | it for the purpose of chang | ging its registere | ed office or regist | ered age | ent, or both, in the State of Florida. I ar | n familiar with, | , and accept | |
| - | And o | | | | | マ ロー | ,7 | | |
| SIGNATURE . | Signature, typed or printed name of registered ag | pent and title if applicable. | (NOTE: Registere | d Agent signature require | red when rei | 3 - i2 - i | | | |
| | | · · · · · · · · · · · · · · · · · · · | | | | | | | |
| After | ILE NOW!!! FEE IS \$150.00 r May 1, 2003 Fee will be \$550.0 c Payable to Florida Department | | | | | Election Campaign Financing Trust Fund Contribution. | | OO May Be d to Fees | |
| 10. | OFFICERS AT | ND DIRECTORS | 11. | | I ADI | DITIONS/CHANGES TO OFFICERS AN | ND DIRECTOR | S IN 11 | |
| TITLÉ | Р | ☐ Delet | ie TITLE | | | | ☐ Change | Addition | |
| NAME | virk, sukhwinder s | | NAM | E | | | | | |
| STREET ADDRESS | 2268 CATBRIAR WAY | | | ET ADDRESS | | | | | |
| CITY-ST-ZIP | OVIEDO FL 32765 | | | -ST-ZIP | | | | | |
| TITLE NAME | | ☐ Delet | e TITLE | l l | | | ☐ Change | ☐ Addition | |
| STREET ADDRESS | | | | ET ADDRESS | | | | | |
| CITY-ST-ZIP | | ~ | | -ST-ZIP | | | | 1 | |
| TITLE | | ☐ Delet | e TITLE | : | | | Change | Addition | |
| NAME | | | NAM! | E *- == | | ميد جايف ۽ الله جيد | . - | _ | |
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| NAME STREET ADDRESS | | | NAMI STRE | ET ADDRESS | | | | | |
| CITY-ST-ZIP | | | | -ST-ZIP | | | | | |
| TITLE | | □ Delet | e TITLE | : | | | Change | ☐ Addition | |
| NAME | | _ 50.00 | NAMI | | | | | | |
| STREET ADDRESS | | | | ET ADDRESS | | | | | |
| CITY-\$T-ZIP | | | | -ST-ZIP | | · | | | |
| TITLE | | ☐ Delete | • | | | | Change | ☐ Addition | |
| name Street address | | | NAME STREE | ET ADDRESS | | | | | |
| CITY-ST-ZIP | | | | -ST-ZIP | | | | | |
| | certify that the information supplied w | vith this filing does not on | | | Section 1 | 19.07(3)(i), Florida Statutes. I further of | artify that the ! | nformation | |
| indicated | on this report or supplemental report | rt is true and accurate and | d that my signat | ure shall have the | e same le | 19.07(3)(1), Florida Statutes, Frumer clegal effect as if made under oath; that la Statutes; and that my name appears | Lam an officer | or director | |
| 0.0 | | Me Dem | | | | 7-17-17 1.07 | 170 01 | 00 | |
| SIGNAT | URE: | | <u>لايا عالمالات</u> | | | 3-12-03 407 | t/8 7/ | 00 | |