**FILED** 

## **2002 UNIFORM BUSINESS REPORT (UBR)**

## Apr 23, 2002 8:00 am Secretary of State DOCUMENT # P95000088566 1. Entity Name MOORE HAVEN ENTERPRISE CORPORATION 04-23-2002 90349 003 \*\*\*150.00 Principal Place of Business Mailing Address MOORE HAVE ENTERPRISE CORP. 1100 U.S. 27 HWY. 834599 1100 U.S. 27 HIGHWAY P.O. BOX 929 MOORE HAVEN FL 33873 MOORE HAVEN FL 33873 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE City & State City & State 4. FEI Number Applied For 65-0619119 Not Applicable Zip Country Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Name J.R. MUNDELL Street Address (P.O. Box Number is Not Acceptable) 120 WEST OAK ST. ARCADIA FL 34266 City Zip Code FL 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 FILE NOW!!! FEE IS \$150.00 9. This corporation is eligible to satisfy its Intangible 10. Election Campaign Financing \$5.00 May Be Tax filing requirement and elects to do so. After May 1, 2002 Fee will be \$550.00 Trust Fund Contribution. (See criteria on back) Make Check Payable to Department of State 11. OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 TITLE ☐ Delete TITLE Change ☐ Addition NAME PATEL, KESHAV NAME STREET ADDRESS 1211 US HIGHWAY 17 NORTH STREET ADDRESS CITY-ST-ZIP WAUCHULA FL 33873 CITY-ST-ZIP TITLE STD ☐ Delete TITLE Change ☐ Addition NAME PATEL, DIPAK NAME STREET ADDRESS 1211 US HIGHWAY 17 NORTH STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP WAUCHULA FL 33873 TITLE VD ☐ Delete TITLE ☐ Change ☐ Addition NAME DESAI, KASHYAP STREET ADDRESS 1211 US HIGHWAY 17 NORTH STREET ADDRESS CITY-ST-ZIP WAUCHULA FL 33873 CITY-ST-ZIP Delete TITLE ☐ Change ☐ Addition PATEL, PRAKASH NAME STREET ADDRESS STREET ADDRESS 1211 US HIGHWAY 17 NORTH CITY-ST-ZIP CITY-ST-ZIP WAUCHULA FL 33873 Delete TITLE Change Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE ☐ Delete Addition ☐ Change 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 itrue 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.

Daytime Phone #