

2000 UNIFORM BUSINESS REPORT (UBR)

1

DOCUMENT # P96000058918

1. Entity Name
TERA ASRA, INC.

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS

00 NOV -3 PM 3:38

Principal Place of Business
7867 ST. ANDREWS CIRCLE
ORLANDO FL 32835

Mailing Address
7867 ST. ANDREWS CIRCLE
ORLANDO FL 32835



DO NOT WRITE IN THIS SPACE

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

4. FEI Number 59-3409842

Applied For
Not Applicable

Zip

Country

Zip

Country

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

HARRISON, CHARLES R
1400 W. FAIRBANKS AVE.
SUITE 203
WINTER PARK FL 32789

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

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) ☐

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

TITLE D
NAME UBEROI, GURVINDER
STREET ADDRESS 7867 ST. ANDREWS CIRCLE
CITY-ST-ZIP ORLANDO FL 32835 ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Change ☐ Addition
200003473502--5
-11/21/00--01111--013
****150.00 ****150.00

TITLE D
NAME UBEROI, JASMINE
STREET ADDRESS 7867 ST. ANDREWS CIRCLE
CITY-ST-ZIP ORLANDO FL 32835 ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Change ☐ Addition

TITLE
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STREET ADDRESS
CITY-ST-ZIP ☐ Delete

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CITY-ST-ZIP ☐ Change ☐ Addition

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CITY-ST-ZIP ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Change ☐ Addition

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:

[Signature]
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

11/1/00

Date

(407) 496-5500

Daytime Phone #

CR2E034 (5/00)

(2)

TERA ASRA INC.
Complete Computer Software Solutions

November 1, 2000

To,
Division of Corporations
Uniform Business Reports Filings
Tallahassee, FL 32302

Sir/Madam,

It came to my attention today that my you did not receive the payment for Uniform business Report Filings. We had mailed the Uniform Business Report along with the check for US\$150.00 on February 18th 2000. The check # was 1291 dated February 18th for US\$ 150.00.


As per my conversation with one of your representative, I have been advised to mail a check for US\$150.00, to reinstate the corporation. As advised I am enclosing along with this letter a check for the amount of US\$150.00.

I would really appreciate, if you can re-instate the Corporation.

If you have any questions, please feel free to call me at (407) 496-5500.

Thanks

Very truly


Gurvinder S Uberoi
(Director)

Customer Satisfaction Is Our Goal