

2001 UNIFORM BUSINESS REPORT (UBR)**DOCUMENT # P96000062417**

1. Entity Name

SHAKTISOFT, INC.**FILED**
Apr 26, 2001 8:00 am
Secretary of State

04-26-2001 90252 024 ***158.75

Principal Place of Business

**230 SE 23RD AVE
BOYNTON BCH FL 33435
US**

Mailing Address

**230 SE 23RD AVE
BOYNTON BCH FL 33435
US**

2. Principal Place of Business

2580 S SEACREST BLVD.

Suite, Apt. #, etc.

3. Mailing Address

2580 S SEACREST BLVD.

Suite, Apt. #, etc.



DO NOT WRITE IN THIS SPACE

City & State

BOYNTON BEACH, FL-33435

City & State

BOYNTON BEACH, FL-33435

4. FEI Number

65-0683806

Applied For

Not Applicable

Zip

33435

Country

USA

Zip

33435

Country

USA5. Certificate of Status Desired ☒**\$8.75** Additional
Fee Required

6. Name and Address of Current Registered Agent

**HAJELA, ATUL B
230 SE 23RD AVE
BOYNTON BCH FL 33435**

7. Name and Address of New Registered Agent

Name

~~ATUL B. HAJELA~~ ATUL B. HAJELA

Street Address (P.O. Box Number is Not Acceptable)

2580 S SEACREST BLVD.

City

BOYNTON BEACH

FL

Zip Code

33435

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

Atul B. Hajela, PRESIDENT**04/18/2001**

Signature, typed or printed name of registered agent or 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 \$150.00**
After MAY 1, 2001 Fee will be \$550.00
Make Check Payable to Department of State10. Election Campaign Financing
Trust Fund Contribution. ☐**\$5.00** May Be
Added to Fees

11. OFFICERS AND DIRECTORS

TITLE **PSTD** ☐ Delete
NAME **HAJELA, ATUL B**
STREET ADDRESS **230 SE 23RD AVE**
CITY-ST-ZIP **BOYNTON BCH FL 33435**TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIPTITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIPTITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIPTITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIPTITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE **PSTD** ☒ Change ☐ Addition
NAME **ATUL B. HAJELA**
STREET ADDRESS **2580 S SEACREST BLVD.**
CITY-ST-ZIP **BOYNTON BEACH, FL-33435**TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIPTITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIPTITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIPTITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIPTITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
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:

Atul B. Hajela

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

04/18/2001

Date

510-444-8732

Daytime Phone #

CR2E034 (10/00)