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Daytime Phone #

2001 UNIFORM BUSINESS REPORT (UBR)

SIGNATURE:

May 04, 2001 8:00 am DOCUMENT # P96000068710 **Secretary of State** 1. Entity Name SUNNY GIFTS, INC. 05-04-2001 90057 014 ***150.00 Principal Place of Business Mailing Address 8445 INTERNATIONAL DR 8445 INTERNATIONAL DR **STE 107 STE 107** ORLANDO FL 32819 ORLANDO FL 32819 2. Principal Place of Business 3. Mailing Address 6500 TANGLEWOOD BAYDR 6500 TANGLEWOOD BAY -Cuite, Apt. #, etc DO NOT WRITE IN THIS SPACE 2008 4. FEI Number Applied For 59-3399787 Not Applicable Country C/SA Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 7. Name and Address of New Registered Agent 6. Name and Address of Current Registered Agent Name DIMPLE PATEL, BIPIN P Street Address (P.O. Box Number is Not Acceptable) 8445 INTERNATIONAL DR **STE 107** ORLANDO FL 32819 City of RIANDO Zip Code 32821 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 (NOTE: Registered Agent signature required when reinstating) 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, 2001 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 Addition ☐ Change Delete TITLE TITLE PATEL, BIPIN P NAME NAME STREET ADDRESS STREET ADDRESS 8445 INTERNATIONAL DR STE 107 CITY-ST-ZIP CITY-ST-ZIP ORLANDO FL 32819 Change ☐ Addition TITLE TITLE 🔽 Delete PATEL, HASHMI B NAME NAME STREET ADDRESS STREET ADDRESS 8445 INTERNATIONAL DR STE 107 CITY-ST-ZIP CITY-ST-ZIF ORLANDO_FL.32819_ ☐ Addition TITLE TITLE ☐ Delete PATEL , MANUBHAL FATEL, MANUBHA NAME NAME 6500 TANGLEWOOD BAY DR, # 2008 STREET ADDRESS STREET ADDRESS 8445 INTERNATIONAL DR STE 107 ORLANDO, FL 32821 CITY-ST-ZIP CITY-ST-ZIP ORLANDO FL 32819 TITLE Delete TITLE X Addition PATEL, DIMPLE 6500 TANGLEWOOD BAY DR # 2008 STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ORLANDO FL 32821 ☐ Delete TITLE ☐ Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE ☐ Delete TITLE □ Change ☐ Addition NAME STREET ADDRESS STREET ADDRESS CITY-ST-7IP 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.

GNING OFFICER OR DIRECTOR