Jul 09, 2002 8:00 am Secretary of State 2002 UNIFORM BUSINESS REPORT (UBR) P96000101195 DOCUMENT # 1. Entity Name 07-09-2002 90370 015 ***150.00 KIMI INVESTMENT CORPORATION Principal Place of Business Mailing Address 795 CYPRESS GARDEN BLVD. 15212 E. COLONIAL DRIVE ORLANDO FL 32826 WINTER HAVEN FL 33880 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE City & State Applied For City & State 4. FEI Number 59-3417099 Not Applicable Country \$8.75 Additional Country 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Name GANDHI, VIJAYKUMAR Street Address (P.O. Box Number is Not Acceptable) 795 CYPRESS GARDEN BLVD. WINTER HAVEN FL 33880 Zip Code City 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. I am familiar with, and accept the obligations of registered agent. SIGNATURE. DATE Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) FILE NOW!!! FEE IS \$550.00 . This corporation is eligible to satisfy its Intangible \$5.00 May Be 10. Election Campaign Financing Tax filing requirement and elects to do so. After September 13, 2002 Fee will be \$750.00 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 OFFICERS AND DIRECTORS 12. 11. ☐ Addition Change ☐ Delete TITLE TITLE GANDHI, VIJAY NAME CAHDHI NAME 795 CYPRESS GARDEN BLVD. STREET ADDRESS 15212 E- COLONIA STREET ADDRESS WINTER HAVEN FL 33880 CITY-ST-ZIP CITY-ST-7IP ☐ Addition Change ☐ Delete TITLE TITLE NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-7IE Addition Change Delete TITLE TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP Change ☐ Addition TITLE ☐ Delete TITLE NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Addition Delete TITLE Change NAME MAME STREET ADDRESS STREET ADDRESS

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.

CITY-ST-ZIP

STREET ADDRESS

CITY-ST-ZIP

TITLE

NAME

SIGNATURE:

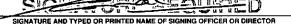
CITY-ST-ZIF

STREET ADDRESS

CITY-ST-ZIP

TITLE

NAME



☐ Delete

☐ Change

☐ Addition

FILED

Attachment P 96000 101195 Document # Kimi Inexamet me P96000101195 119397 15212 E. Colonial Bruc Estendo, PL 33826. de thing 2000 Tel: 863-289-7970. Dear Siz.
Dhuision on Corporations 16.0. BK- 1500: Tallaharser, FL 32302 Subject: Corporation. Rencard Free. S83, As pos telephone dessession aun Crestomer services, taleahassee, 5 anne hercain enclosing a chall # M 1500 Filip der, isterdar & 5300 Till to day I have not recovered any letter reguling too kimi must me. As per telephone decussion, can fore phase ware the late fling for 550. Thomas for Cor-appeacation. 9/3 factifuly