

2002 UNIFORM BUSINESS REPORT (UBR)**FILED**
Jul 09, 2002 8:00 am
Secretary of State

07-09-2002 90370 015 ***150.00

DOCUMENT # P96000101195**1. Entity Name**
KIMI INVESTMENT CORPORATION**Principal Place of Business****15212 E. COLONIAL DRIVE**
ORLANDO FL 32826**Mailing Address****795 CYPRESS GARDEN BLVD.**
WINTER HAVEN FL 33880**2. Principal Place of Business****3. Mailing Address**

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

4. FEI Number **59-3417099**

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****GANDHI, VIJAYKUMAR**
795 CYPRESS GARDEN BLVD.
WINTER HAVEN FL 33880

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. I am familiar with, and accept the obligations of registered agent.**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, 2002 Fee 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** **PV** ☐ Delete
NAME **GANDHI, VIJAY**
STREET ADDRESS **795 CYPRESS GARDEN BLVD.**
CITY-ST-ZIP **WINTER HAVEN FL 33880****TITLE** **PV** ☐ Change ☐ Addition
NAME **GANDHI VIJAY**
STREET ADDRESS **15212 E. Colonial Drive**
CITY-ST-ZIP **Orlando, FL 32826****TITLE** ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP**TITLE** ☐ Change ☐ Addition
NAME
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CITY-ST-ZIP**TITLE** ☐ Delete
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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:****SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR**

Date

Daytime Phone #

CR2E034 (4/02)

Attachment
Document #
P96000101195
119397

P 96000101195
Kimi Investment Inc
15212 E. Colonial Dr
Orlando, FL 32826.
dt 7th July 2002
Tel: 863-287-7970.

To,
Dear Sir,
Division of Corporations
P.O. Box 1500
Tallahassee, FL 32302

Subject: Corporation. Renewal Fee.

Sir,

As per telephone discussion with
Customer services, Tallahassee, I am
herewith enclosing a check #

for \$150⁰⁰ filing fee, instead of \$530⁰⁰.

Till today I have not received any
letter regarding ~~the~~ Kimi Invest. Inc.

As per telephone discussion, Can you
please waive the late filing fee \$530.

Thank you for cooperation.

Yrs faithfully

