

2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

FILED
Jan 27, 2003 8:00 am
Secretary of State

01-27-2003 90177 023 ***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

15212 E. Colonial Dr
Suite, Apt. #, etc.

3. Mailing Address

17314 Emerald Chase Dr
Suite, Apt. #, etc.



☒ CHECK HERE IF MAKING CHANGES

City & State
Orlando Florida

Zip Country
32826 FL

City & State
Tampa Florida

Zip Country
33647 FL

4. FEI Number
59-3417099

Applied For
☐ Not Applicable

5. Certificate of Status Desired ☐ **\$8.75 Additional Fee Required**

6. Name and Address of Current Registered Agent

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

7. Name and Address of New Registered Agent

Name **GANDHI VIJAYKUMAR**
Street Address (P.O. Box Number is Not Acceptable)
17314 Emerald Chase Dr
City **Tampa** State **FL** Zip Code **33647**

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: **01/10/03**

FILE NOW!!! FEE IS \$150.00
After May 1, 2003 Fee will be \$550.00
Make Check Payable to Florida Department of State

9. Election Campaign Financing
Trust Fund Contribution. ☐ **\$5.00 May Be Added to Fees**

10. OFFICERS AND DIRECTORS

TITLE **PV** ☐ Delete
NAME **GANDHI, VIJAY**
STREET ADDRESS **15212 E COLONIAL DR**
CITY-ST-ZIP **ORLANDO FL 32826**

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

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NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE **PV** ☒ Change ☐ Addition
NAME **GANDHI VIJAY**
STREET ADDRESS **17314 Emerald Chase Dr**
CITY-ST-ZIP **Tampa, FL 33647**

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

TITLE ☐ Change ☐ Addition
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12. 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

SIGNATURE REQUIRED
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date: **01/10/03** Daytime Phone: **82-287-7910**

CR2E034 (10/02)