

2001 UNIFORM BUSINESS REPORT (UBR)

FILED
Mar 01, 2001 8:00 am
Secretary of State

03-01-2001 90055 041 ***150.00

DOCUMENT # **P97000013617**

1. Entity Name
SUCH, INC.

Principal Place of Business
**16301 MARTIN LUTHER KING BLVD.
 ALACHUA FL 32615**

Mailing Address
**16301 MARTIN LUTHER KING BLVD.
 ALACHUA FL 32615**

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number **59-3466288**

Applied For
 Not Applicable

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

DO NOT WRITE IN THIS SPACE



6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

**PATEL, CHARU S
 16301 MARTIN LUTHER KING BLVD.
 ALACHUA FL**

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.

SIGNATURE CS Patel

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 \$150.00
After MAY 1, 2001 Fee will be \$550.00
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 | P | <input type="checkbox"/> Delete |
| NAME | PATEL, MANOJ | |
| STREET ADDRESS | 16301 MARTIN LUTHER KING BLVD | |
| CITY-ST-ZIP | ALACHUA FL | |
| TITLE | VP | <input type="checkbox"/> Delete |
| NAME | PATEL, SUMANT | |
| STREET ADDRESS | 16301 MARTIN LUTHER KING BLVD | |
| CITY-ST-ZIP | ALACHUA FL | |
| TITLE | ST | <input type="checkbox"/> Delete |
| NAME | PATEL, CHARU | |
| STREET ADDRESS | 16301 MARTIN LUTHER KING BLVD | |
| CITY-ST-ZIP | ALACHUA FL | |
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| 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: CS Patel

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

2-22-01

Date

904-462-7933

Daytime Phone #

CR2E034 (10/00)