

2002 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P97000020514

1. Entity Name
INTERNATIONAL STERILIZATION LABORATORY CORPORATI
ON

Principal Place of Business

217 SAMPEY ROAD
GROVELAND FL 34736

Mailing Address

217 SAMPEY ROAD
GROVELAND FL 34736

2. Principal Place of Business

Suite, Apt. #, etc.

City & State

Zip

Country

3. Mailing Address

Suite, Apt. #, etc.

City & State

Zip

Country

4. FEI Number

36-4077025

Applied For

Not Applicable

5. Certificate of Status Desired

☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

MURPHY, MICHAEL J
217 SAMPEY ROAD
GROVELAND FL 34736

7. Name and Address of New Registered Agent

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

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, 2002 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

TITLE CD
NAME PANDYA, SUMAN D
STREET ADDRESS 2223 PAPERIA DR
CITY-ST-ZIP ORLANDO FL 32837
7926 Glen Crest Way
Orlando-FL-32836

TITLE D
NAME MURPHY, MICHAEL J
STREET ADDRESS 18835 STARCREST LN
CITY-ST-ZIP CLERMONT FL 34711

TITLE D
NAME PATEL, BIPIN
STREET ADDRESS 310 WINTER HAVEN WAY
CITY-ST-ZIP COLUMBUS GA 31904

TITLE D
NAME BHUSHIT, DIXIT
STREET ADDRESS 1474 MILLINGTON RD
CITY-ST-ZIP COLUMBUS GA 31904

TITLE D
NAME JOSHI, HARSHVADAN
STREET ADDRESS 6301 BROOKSTONE BLVD
CITY-ST-ZIP COLUMBUS GA 31904

TITLE D
NAME PANDYA, JANAK
STREET ADDRESS 10118 FOXHURST CT
CITY-ST-ZIP ORLANDO FL 32836

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE Yashvant Patel
NAME Yashvant Patel
STREET ADDRESS 6963 Gaines Ridge Road
CITY-ST-ZIP Columbus - GA - 31904

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE
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:

SIGNATURE REQUIRED PANDYA CEO

1/4/02

352-429-3200

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

FILED
Jan 07, 2002 8:00 am
Secretary of State

01-07-2002 90012 050 ***150.00



DO NOT WRITE IN THIS SPACE

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CR2E034 (9/01)