

# 2001 UNIFORM BUSINESS REPORT (UBR)

**FILED**  
**May 22, 2001 8:00 am**  
**Secretary of State**

05-22-2001 90050 023 \*\*\*150.00

DOCUMENT # P97000040214

1. Entity Name

MAHARANI INTERNATIONAL INC

Principal Place of Business

3291 W. SUNRISE  
 BLVD  
 FT LAUDERDALE  
 FL 33311

Mailing Address

4255. N. UNIVERSITY DR  
 APT# 204  
 SUNRISE FL 33351

770378

2. Principal Place of Business

Suite, Apt. #, etc.

City & State

Zip

Country

3. Mailing Address

Suite, Apt. #, etc.

City & State

Zip

Country

1243 NW 108 Ave

Plantation FL

33322

USA

4. FEI Number

65-0756839

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

HARBINDER S. BAWEJA  
 4255. N UNIVERSITY DR.  
 #204 SUNRISE FL 33351

7. Name and Address of New Registered Agent

Name HARBINDER S. BAWEJA

Street Address (P.O. Box Number is Not Acceptable)

1243 NW 108 Ave

City PLANTATION

FL

Zip Code

33322

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

Harbinder Singh (HARBINDER S. BAWEJA)

4-30-01

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

TITLE D  
 NAME HARBINDER S. BAWEJA ☐ Delete  
 STREET ADDRESS 4255 N. UNIVERSITY DR #204  
 CITY-ST-ZIP SUNRISE FL 33351

TITLE D  
 NAME HARVINDER RAJPAL ☐ Delete  
 STREET ADDRESS 343 E RIVERBEND DR  
 CITY-ST-ZIP SUNRISE FL 33326

TITLE D  
 NAME KULBIR KAUR ☐ Delete  
 STREET ADDRESS 4255 N UNN. DR #204  
 CITY-ST-ZIP SUNRISE FL 33351

TITLE ☐ Delete  
 NAME  
 STREET ADDRESS  
 CITY-ST-ZIP

TITLE ☐ Delete  
 NAME  
 STREET ADDRESS  
 CITY-ST-ZIP

TITLE ☐ Delete  
 NAME  
 STREET ADDRESS  
 CITY-ST-ZIP

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE P ☒ Change ☐ Addition  
 NAME HARBINDER S BAWEJA  
 STREET ADDRESS 1243 NW 108 Ave  
 CITY-ST-ZIP Plantation FL 33322

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

TITLE D ☐ Change ☐ Addition  
 NAME KULBIR KAUR  
 STREET ADDRESS 1243 NW 108 Ave  
 CITY-ST-ZIP Plantation FL 33322

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

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

TITLE ☐ Change ☐ Addition  
 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:

Harbinder Singh (HARBINDER S. BAWEJA)

4-30-01

(954) 4230909

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Telephone/Facsimile #

CR2E034 (11/00)