

2002 UNIFORM BUSINESS REPORT (UBR)

FILED
Jan 16, 2002 8:00 am
Secretary of State

01-16-2002 90238 015 ***150.00

DOCUMENT # P97000060569

1. Entity Name

RITU, INC.

Principal Place of Business

2725 N. PINE HILLS ROAD
 ORLANDO FL 32808

Mailing Address

2725 N. PINE HILLS ROAD
 ORLANDO FL 32808

2. Principal Place of Business

1675 RACHEL'S RIDGE Loop

Suite, Apt. #, etc.

OCOE FL

City & State

34761

Zip

Country

ORANGE

3. Mailing Address

1675 RACHELS Ridge Loop

Suite, Apt. #, etc.

OCOE FLORIDA

City & State

34761

Zip

Country

ORANGE



DO NOT WRITE IN THIS SPACE

4. FEI Number

59-3456712

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
 Fee Required

6. Name and Address of Current Registered Agent

PATEL, MULKA J

2725 N. PINE HILLS ROAD
 ORLANDO FL 32808

7. Name and Address of New Registered Agent

Name

PATEL MULKA J

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

1675 RACHELS RIDGE Loop

City

OCOE

FL

Zip Code

34761

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

Mulka J Patel

01/01/02

Signature, typed or printed name of registered agent and fee 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	PSTD	☐ Delete
NAME	PATEL, MULKA J	
STREET ADDRESS	2725 N. PINE HILLS ROAD	
CITY-ST-ZIP	ORLANDO FL 32808	
TITLE		☐ Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
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	PATEL MULKA J	☒ Change ☐ Addition
NAME		
STREET ADDRESS	1675 RACHELS RIDGE Loop	
CITY-ST-ZIP	OCOE FL 34761	
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		
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:

Mulka J Patel

01/01/02

407-297-1147

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E034 (9/01)