

2001 UNIFORM BUSINESS REPORT (UBR)

FILED
Apr 16, 2001 8:00 am
Secretary of State

04-16-2001 90481 006 ***150.00

DOCUMENT # **P97000062970**

1. Entity Name

Shipra Group Inc

Principal Place of Business

Mailing Address

**6535 NW 46 Street
 Landershill, FL 33319**

2. Principal Place of Business

3. Mailing Address

5172 N.W. 74 Court

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

Coconut Creek, FL

City & State

4. FEI Number

05-0769977

Applied For
 Not Applicable

Zip

Country

33073

USA

Zip

Country

5. Certificate of Status Desired

\$8.75 Additional
 Fee Required

6. Name and Address of Current Registered Agent

**David B Mankuta Esq
 1946 Tyler Street
 Hollywood, FL 33020**

7. Name and Address of New Registered Agent

Title

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

City

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 reappointing)

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. **President** OFFICERS AND DIRECTORS

TITLE **President** ☐ Delete
 NAME **Gangadhar Mahanthi**
 STREET ADDRESS **6535 N.W. 46 Street**
 CITY-STATE-ZIP **Landershill, FL 33319**

TITLE ☐ Delete
 NAME
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 NAME
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 CITY-STATE-ZIP

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE ☒ Change ☐ Addition
 NAME
 STREET ADDRESS **5172 N.W. 74 Court**
 CITY-STATE-ZIP **Coconut Creek, FL 33073**

TITLE ☐ Change ☐ Addition
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 CITY-STATE-ZIP

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 CITY-STATE-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 the 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:

M. Gangadhar
 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Gangadhar Mahanthi

Date

Signature of Secretary of State