

2001 UNIFORM BUSINESS REPORT (UBR)**FILED**
Aug 07, 2001 8:00 am
Secretary of State

08-07-2001 90008 001 ***150.00

012840 AT

DOCUMENT # P970000643661. Entity Name
KURUPACHERY, INC.Principal Place of Business
**5221 NW 53RD ST
GAINESVILLE FL 32653**Mailing Address
**5221 NW 53RD ST
GAINESVILLE FL 32653****C0074900**

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

4. FEI Number **65-0768959**

Applied For

Not Applicable

Zip

Country

Zip

Country

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

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

**KURUPACHERY, BAVOO J
5221 NW 53RD STREET
GAINESVILLE FL 32653**

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 \$550.00
After September 12, 2001 Fee will be \$750.00
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** ☐ Delete
NAME **KURUPACHERY, BAVOO J**
STREET ADDRESS **5221 NW 53 STREET**
CITY-ST-ZIP **GAINESVILLE FL 32653**TITLE **D** ☐ Delete
NAME **KURUPACHERY, MARY J**
STREET ADDRESS **5221 NW 53RD STREET**
CITY-ST-ZIP **GAINESVILLE FL 32653**TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIPTITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIPTITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIPTITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIPTITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIPTITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIPTITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIPTITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIPTITLE ☐ 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: *Bavoo Kurupachery*

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

7-31-01

11/17/01 15:00

Attachment Doc #

P9700004366

C0074900

Bavoo Kurupachery
5221 NW 53rd Street
Gainesville, FL 32653

Florida Department of State
Division of Corporations
Tallahassee, FL 32302-1500

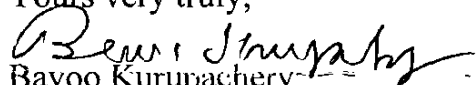
Re: Kurupachery, Inc.

Sir/Madam:

I did not receive my Uniform Business Report Instructions as usual
~~in the beginning of the year and I received the reminder form last week.~~
Since I did not receive my form on time, I called your office today and
talked to Marie in your office and she advised me to send a letter with
\$ 150 check.

Please excuse the delay in sending the form and the money and form.

Yours very truly,


Bavoo Kurupachery