

2001 UNIFORM BUSINESS REPORT (UBR)

FILED

Apr 30, 2001 8:00 am
Secretary of State

04-30-2001 90358 003 ***150.00

DOCUMENT # P98000009368

1. Entity Name

DYNAMIC HEALTH PRODUCTS, INC.

Principal Place of Business

6950 BRYAN DAIRY RD
LARGO FL 33777
US

Mailing Address

6950 BRYAN DAIRY RD
LARGO FL 33777
US

2. Principal Place of Business

6925 112th Circle North

Suite, Apt. #, etc.

Suite 101

City & State

Largo, FL

Zip

33773

Country

USA

3. Mailing Address

6925 112th Circle North

Suite, Apt. #, etc.

Suite 101

City & State

Largo, FL

Zip

33773

Country

USA



DO NOT WRITE IN THIS SPACE

4. FEI Number 34-1711778

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

SEKHARAM KOTHA S
6950 BRYAN DAIRY ROAD
LARGO FL 33777

7. Name and Address of New Registered Agent

Name

Jugal K. Taneja

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

6950 Bryan Dairy Road

City

Largo

FL

Zip Code

33777

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

Jugal K. Taneja, Chairman

4/23/01

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 NAME STREET ADDRESS CITY-ST-ZIP	CD TANEJA, JUGAL K 6950 BRYAN DAIRY RD LARGO FL 33777	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD SEKHARAM, KOTHA S 6950 BRYAN DAIRY RD LARGO FL 33777	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DVC SANTASTAS, PAUL A 6950 BRYAN DAIRY RD LARGO FL 33777	<input checked="" type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	ST SHUMEN, CANI 6950 BRYAN DAIRY RD LARGO FL 33777	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D SHERMA, RAKESH K M.D. 6950 BRYAN DAIRY RD LARGO FL 33777	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D TRABER, MARTIN A 6950 BRYAN DAIRY RD LARGO FL 33777	<input checked="" type="checkbox"/> Delete

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D Sekharam, Kothe S. 6950 Bryan Dairy Rd Largo, FL 33777	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	ST CFO Shumen, Cani 6925 112th Circle N, Suite 101 Largo, FL 33773	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D Sharma, Rakesh K. M.D. 6925 112th Circle N, Suite 101 Largo, FL 33773	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD Taneja, Mandeep K. 6925 112th Circle N, Suite 101 Largo, FL 33773	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition

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

Jugal K. Taneja, Chairman

4/23/01

727/544-8866

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E034 (10/00)