

2003 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT# P98000050689

FILED
Jan 05, 2003
Secretary of State

Entity Name: AKSHAY ENTERPRISES INC.

Current Principal Place of Business:

4325 AMBERBROOK CT
JACKSONVILLE, FL 32224

New Principal Place of Business:

4325 AMBERBROOK CT
JACKSONVILLE, FL 32224 US

Current Mailing Address:

4325 AMBERBROOK CT
JACKSONVILLE, FL 32224

New Mailing Address:

4325 AMBERBROOK CT
JACKSONVILLE, FL 32224 US

FEI Number: 59-3519596

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

PANJWANI, NIRANJAN K
4325 AMBERBROOK CT
JACKSONVILLE, FL 32224

Name and Address of New Registered Agent:

PANJWANI, NIRANJAN K
4325 AMBERBROOK CT
JACKSONVILLE, FL 32224 US

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:

01/05/2003

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: PD () Delete
Name: PANJWANI, NIRANJAN K
Address: 4325 AMBERBROOK CT
City-St-Zip: JACKSONVILLE, FL 32224

Title: VD () Delete
Name: PANJWANI, MAYA
Address: 4325 AMBERBROOK CT
City-St-Zip: JACKSONVILLE, FL 32224

Title: STD () Delete
Name: ARORA, MONICA
Address: 4325 AMBERBROOK CT
City-St-Zip: JACKSONVILLE, FL 32224

Title: () Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: STD (X) Change () Addition
Name: ARORA, MONICA
Address: 9027 HAMPTON LANDING DR E
City-St-Zip: JACKSONVILLE, FL 32256 US

Title: D () Change (X) Addition
Name: ARORA, INDER P
Address: 9027 HAMPTON LANDING DR E
City-St-Zip: JACKSONVILLE, FL 32256 US

I hereby certify that the information supplied with this filing does not qualify for the 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 electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: MONICA ARORA

STD

01/05/2003

Electronic Signature of Signing Officer or Director

Date