

2001 UNIFORM BUSINESS REPORT (UBR)

FILED
Apr 30, 2001 8:00 am
Secretary of State

04-30-2001 90455 048 ***150.00

DOCUMENT # **P980000056460**
1. Entity Name **Tampasoft Inc**

Principal Place of Business **15441 Plantation Oaks Drive #5, Tampa FL 33647**
Mailing Address **15441 Plantation Oaks Drive #5, Tampa FL 33647**

2. Principal Place of Business **15441 Plantation Oaks Dr.**
Suite, Apt. #, etc. **5**
3. Mailing Address **15441 Plantation Oaks Dr. #5**
Suite, Apt. #, etc. **#5**

City & State **Tampa, FL**
Zip **33647** Country **USA**
City & State **Tampa, FL**
Zip **33647** Country **USA**

4. FEI Number **59-3518482**
Applied For ☐ Not Applicable

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

6. Name and Address of Current Registered Agent
Naresh Sharma
15441 Plantation Oaks Drive #5
Tampa, FL 33647

7. Name and Address of New Registered Agent
Name **Naresh Sharma**
Street Address (P.O. Box Number is Not Acceptable) **15441 Plantation Oaks Drive #5**
City **Tampa** FL Zip Code **33647**

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  **4/16/2001**
Signature, typed or printed name of registered agent and title acceptable. (NOTE: Registered Agent's signature required when reinstating) DATE

9. This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so. ☐
10. Election Campaign Financing Trust Fund Contribution. ☐ **\$5.00** May Be Added to Fees
FILE NOW!!! FEE IS \$150.00
After MAY 1, 2001 Fee will be \$550.00
Make Check Payable to Department of State

11. OFFICERS AND DIRECTORS

TITLE	NAME	STREET ADDRESS	CITY - ST - ZIP	<input type="checkbox"/> Delete
PRESIDENT	Naresh Sharma	15441 Plantation Oaks Drive #5	Tampa, FL 33647	<input type="checkbox"/>
CEO	Meenakshi Sharma	15441 Plantation Oaks Drive #5	Tampa, FL 33647	<input type="checkbox"/>
				<input type="checkbox"/>
				<input type="checkbox"/>
				<input type="checkbox"/>
				<input type="checkbox"/>

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11:

TITLE	NAME	STREET ADDRESS	CITY - ST - ZIP	<input type="checkbox"/> Change	<input type="checkbox"/> Addition
	Meenakshi Sharma			<input type="checkbox"/>	<input type="checkbox"/>
				<input type="checkbox"/>	<input type="checkbox"/>
				<input type="checkbox"/>	<input type="checkbox"/>
				<input type="checkbox"/>	<input type="checkbox"/>
				<input type="checkbox"/>	<input type="checkbox"/>
				<input type="checkbox"/>	<input type="checkbox"/>

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:  **4/16/2001** **813-494-4468**
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

CR2E034 (1/1/00)