2001 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P98000049180

1. Entity Name
FIRST MK CORPORATION

1 of 2

FILED
01 DEC 13 PM 3:02
SECRETARY OF STATE
TALLAHASSEE FLORIDA

Principal Place of Business	Mailing Address
6655 CENTRAL AVE ST. PETERSBURG FL - 33710	1819 ALICIA WAY CLEARWATER FL - 33764

2. Principal Place of Business	3. Mailing Address
1819 ALICIA WAY	1819 ALICIA WAY
Suite, Apt. #, etc.	Suite, Apt. #, etc.
City & State: CLEARWATER FLORIDA	City & State: CLEARWATER, FL
Zip: 33764 Country: USA	Zip: 33764 Country:

99-01

DO NOT WRITE IN THIS SPACE

4. FEI Number: 59-3526412 ☐ Applied For ☐ Not Applicable

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
MANJU TANEJA	Name: KRISHNA SHARMA Street Address (P.O. Box Number is Not Acceptable): 1819 ALICIA WAY City: CLEARWATER FL Zip Code: 33764

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: Krishna Sharma — Dec 11 - 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) ☐

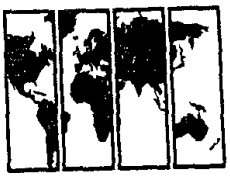
10. Election Campaign Financing Trust Fund Contribution. ☐ **$5.00** May Be Added to Fees

11. OFFICERS AND DIRECTORS		12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	PRESIDENT KRISHNA SHARMA 1819 ALICIA WAY CLEARWATER FL-33764 ☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	SECRETARY KRISHNA SHARMA 1819 ALICIA WAY CLEARWATER FL-33764 ☐ Change ☒ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	~~VICE PRESIDENT~~ ☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	TREASURER KRISHNA SHARMA 1819 ALICIA WAY CLEARWATER FL-33764 ☐ Change ☒ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	SECRETARY MANJU TANEJA ☒ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ Change ☐ Addition 500004743585--9 -12/31/01--01005--024 ****450.00 ****450.00
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	TREASURER MANJU TANEJA ☒ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ Change ☐ Addition

CR2E034 (11/00)

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: Krishna Sharma — Nov 22-01
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #

FOUR SEASONS TRAVEL  **THE CRUISE CENTER** 2012

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Subject - Reinstatement

Previous notices were not received because of wrong address.

Krishna Sharma
owner / mana

FOUR SEASONS TRAVEL
PH 727-347-4000
6655 CENTRAL AVE
ST PETERSBURG, FL 33710

2380

63-751/631
BRANCH 13092

DATE Dec 11 01

PAY TO THE ORDER OF Division of Corporation $ 450—

Four hundred fifty 00 DOLLARS

FIRST UNION First Union National Bank
R/T 063107513

FLEXIBLE BUSINESS BANKING

FOR _____ Krishna Sharma

⑈002380⑈ ⑆063107513⑆ 2090002347805⑈

6655 Central Avenue • St. Petersburg, Florida 33710
(727) 347-4000 • (727) 345-1111 • (800) 771-4545 • E-mail: fo[redacted]ate.net
Fax- 727-384-0007