

2001 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P98000074099

1. Entity Name
SIERRA INFORMATION & MANAGEMENT SERVICES INC.

APPROVED
AND
FILED

01 FEB 20 PM 4:38

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Principal Place of Business Mailing Address

3632 SHAMROCK WEST
TALLAHASSEE, FL-32308

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

3632 SHAMROCK WEST

Suite, Apt. #, etc.

3632 SHAMROCK WEST

City & State

TALLAHASSEE, FL-32308

City & State

TALLAHASSEE, FL

Zip

32308

Country

USA

Zip

32308

Country

USA

4. FEI Number

59-3531443

Applied For

Not Applicable

5. Certificate of Status Desired

☒

\$8.75 Additional
Fee Required

DO NOT WRITE IN THIS SPACE

6. Name and Address of Current Registered Agent

SARAT K. RACHULAPALLI
3610 CAANEY DR.
TALLAHASSEE, FL-32308

7. Name and Address of New Registered Agent

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 R. St. Kiner SARAT K. RACHULAPALLI, PRESIDENT 2/20/01

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 VICE PRESIDENT ☒ Delete
NAME ANIL K. GULLAPALLI
STREET ADDRESS 128 ASCOT LN.
CITY-ST-ZIP WILLOW BROOK, IL - 60514

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE ☐ Change ☒ Addition
NAME RICHARD SUTTON
STREET ADDRESS 116 LAFAYETTE STREET
CITY-ST-ZIP PAWTUCKET, RI - 02860

TITLE ☒ Change ☐ Addition
NAME PD
STREET ADDRESS SARAT K. RACHULAPALLI
CITY-ST-ZIP 3610 CAANEY DR.
TALLAHASSEE, FL-32308

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ 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: R. St. Kiner SARAT K. RACHULAPALLI 2/20/01 850-907-9991

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E034 (11/00)