2001 UNIFORM BUSINESS REPORT (UBR)

03-21-2001 90046 038 ***158.75
P98000074514
FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
01 MAR 30 AM 9:08
A0035612

DOCUMENT # P98000074514

1. Entity Name: Vijay Group Inc.

Principal Place of Business: 5100 NW 22 Ave. Miami, Fl. 33142

Mailing Address:

2. Principal Place of Business: Same
Suite, Apt. #, etc.:
City & State:
Zip: Country:

3. Mailing Address: 5335 NW 190 LN
Suite, Apt. #, etc.:
City & State: MIAMI FL
Zip: 33055 Country: DADE

DO NOT WRITE IN THIS SPACE

4. FEI Number: 65-0859441 ☐ Applied For ☐ Not Applicable

5. Certificate of Status Desired ☒ $8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

GURDAWER SINGH
241 S. ROYAL PONC. BLVD
MIAMI FL 33166

7. Name and Address of New Registered Agent

Name: Daksa S. Rathore (DAKSHA)
Street Address (P.O. Box Number is Not Acceptable): 5335 NW 190 Ln.
City: Miami FL Zip Code: 33055

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: X Gurdawer Singh 3/16/2001
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			12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	V. President GURDAWER SINGH 241 S. ROYAL PONS. BLVD MIAMI FL 33166	☐ Delete	Register Agent T & Pres. Daksha S. Rathore 5335 NW 190 Ln. Miami, Fl. 33055	☒ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Delete	300003959633--0 -04/05/01--01002--002 ****300.00 ****300.00	☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Delete		☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Delete		☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Delete		☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Delete		☐ 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: X Gurdawer Singh 3/16/2001 305 621-0488
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #

3/21/01