

2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

FILED
Sep 09, 2003 8:00 am
Secretary of State

09-09-2003 90028 004 ***550.00

DOCUMENT # P98000094991

1. Entity Name
PANFIN, INC.



Principal Place of Business
**15701 MLK BLVD
ALACHUA FL 32615
US**

Mailing Address
**15701 MLK BLVD
ALACHUA FL 32615
US**

2. Principal Place of Business

15980 NW HWY 441

3. Mailing Address

3003 NW 30th Terr.

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

ALACHUA - FL

City & State

Gainesville - FL

4. FEI Number **59-3544452**

Applied For

Not Applicable

Zip **32615**

Country **ALACHUA**

Zip **32605**

Country **ALACHUA**

5. Certificate of Status Desired ☐

\$8.75 Additional Fee Required

☐ CHECK HERE IF MAKING CHANGES

6. Name and Address of Current Registered Agent

**MODI, PANKAJ
8008 NW 31ST AVE
#608
GAINESVILLE FL 32606**

7. Name and Address of New Registered Agent

Name **MODI PANKAJ**
Street Address (P.O. Box Number is Not Acceptable)
3003 NW 30th Terr.
City **Gainesville** FL Zip Code **32605**

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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE Signature, typed or printed name of registered agent and time if applicable.

PANKAJ MODI PRESIDENT 9.5.03
(NOTE: Registered Agent signature required when reinstating) DATE

FILE NOW!!! FEE IS \$550.00
After September 10, 2003 Fee will be \$750.00
Make Check Payable to Florida Department of State

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

10. OFFICERS AND DIRECTORS

TITLE **P** ☐ Delete
NAME **MODI, PANKAJ**
STREET ADDRESS **8008 NW 31ST AVE #608**
CITY-ST-ZIP **GAINESVILLE FL 32615**

TITLE **V** ☐ Delete
NAME **SHAH, MEENA S**
STREET ADDRESS **5455 W. GROVE**
CITY-ST-ZIP **SKOKIE IL 60077**

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

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

President ☒ Change ☐ Addition
Name **Modi Pankaj**
Street Address **3003 NW 30th Terr.**
City-ST-ZIP **Gainesville FL-32605**

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

Secretary ☐ Change ☒ Addition
Name **MODI, MAMTA**
Street Address **3003 NW 30th Terr.**
City-ST-ZIP **Gainesville FL-32605**

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

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

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

12. 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: **PANKAJ MODI**
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR **President** Date **9.5.03** Daytime Phone # **386-462-5501**

CR2E034 (4/03)