2000 UNIFORM BUSINESS REPORT (UBR) P98000104979 DOCUMENT # 1. Entity Name BHAYIJIT INC 00 FEB 28 AM 10: 48 Principal Place of Business 5980 WEST GULF TO LAKE 5980 WEST GULF TO LAKE HIGHWAY HIGHWAY CRYSTAL RIVER FL 34429 CRYSTAL RIVER FL 34429 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE City & State City & State 4. FEI Number Applied For 59-3543317 Not Applicable Zip Country Zip Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Name SHALLESH AMIN Street Address (P.O. Box Number is Not Acceptable) 5980 W. GULF TO LAKE HWY CRYSTAL RIVER FL 34429 City 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, typed or printed name of registered agent and title if applicable DATE (NOTE: Registered Agent signature required when reinstating) FILE NOW!!! FEE IS \$150.00 9. This corporation is eligible to satisfy its Intangible 10. Election Campaign Financing \$5.00 May Be After MAY 1, 2000 Fee will be \$550.00 Tax filing requirement and elects to do so. Trust Fund Contribution. Added to Fees (See criteria on back) Make Check Payable to Department of State ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 OFFICERS AND DIRECTORS 11. 12. TITLE Delete TITLE Change Addition PRESIDENT 400003164684 NAME SHAILESH AMIN NAME 5980 W. GULF TO LAKE HWY -03/10/00--01011--007 STREET ADDRESS STREET ADDRESS ****300.00 ****300.00 CITY-ST-ZIP CITY-ST-ZIP CRYSTAL RIVER FL, 34429 ☐ Change ☐ Addition Delete TITLE TITLE JAYMINI AMIN 5980 W. GULF TO LAKE HUST NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP CRYSTAL RIVER, FL. 34429 THIS UNIFORM BUSINESS REPORT IS Addition TITLE TITLE □ Delete NAME NAME FOR THE YEARS 1999 & 2000 STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP Addition ☐ Delete TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Delete TITLE Change Addition TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP Change Addition ☐ Delete TITLE TITLE NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP 13. Thereby certify that the information supplied with this filling does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information

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 affecting the empowered.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

2-24-2000

352-563-240

Date

Daytime Phone #

BHAVIIT INC 5980 W GULF TO LAKE HWY CRYSTAL RIVER, FL 34429

FLORIDA DEPARTMENT OF STATE DIVISION OF CORPORATIONS P O BOX 6327 TALLAHASSEE, FL 32314

ATT. BUCK KOHER

DOC# P98000104979

This is in reply to your letter dated February 21, 2000, we enclosed 2000 UBR form as advised by you, duly filled and with check of \$300.00.

As informed to you over the telephone, that there is a change in the mailing address so we believe that it was lost in transit. Please excuse us for the inconvenience caused and request you to revoke the penalty of \$600.00.

Please reinstate the corporation with information as provided in our UBR FORM.

Sincerely,

Shailesh Amin

President

February 24, 2000