2003 FOR PROFIT CORPORATION

Jan 17, 2003 8:00 am Secretary of State UNIFORM BUSINESS REPORT (UBR **DOCUMENT #** P9900003272 1. Entity Name 01-17-2003 90085 006 ***150.00 KAPIL, INC. Principal Place of Business Mailing Address 357 S. ATLANTIC AVE. 90004645 357 S. ATLANTIC AVE. DAYTONA BEACH FL 32118 DAYTONA BEACH FL 32118 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. ☐ CHECK HERE IF MAKING CHANGES City & State City & State 4. FEI Number Applied For 59-3550518 Zip Not Applicable Country Zip Country \$8.75 Additional 5. Certificate of Status Desired 6. Name and Address of Current Registered Agent Fee Required 7. Name and Address of New Registered Agent Name PATEL NARESH V Street Address (P.O. Box Number is Not Acceptable) 357 S. ATLANTIC AVE. DAYTONA BEACH FL 32118 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. I am familiar with, and accept SIGNATURE Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) FILE NOW!!! FEE IS \$150.00 After May 1, 2003 Fee will be \$550.00 9. Election Campaign Financing \$5.00 May Be Make Check Payable to Florida Department of State Trust Fund Contribution. Added to Fees 10. OFFICERS AND DIRECTORS 11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 TITLE ☐ Delete TITLE NAME Change ☐ Addition PATEL, NARESH V NAME STREET ADDRESS 357 S ATLNATIC AVE STREET ADDRESS CITY-ST-ZIE DAYTONA BEACH FL 32118 CITY-ST-ZIP TITLE ☐ Delete TITLE ☐ Change NAME ☐ Addition PATEL, PRADIP I NAME STREET ADDRESS 640 SO. RIDGEWOOD AVE STREET ADDRESS CITY-ST-ZIP DAYTONA BEACH FL 32114 CITY-ST-ZIP TITLE ☐ Delete TITLE Change NAME ☐ Addition PATEL, BHUPENDRA NAME STREET ADDRESS 1400 N ATLANTIC AVE STREET ADDRESS CITY-ST-ZIP DAYTONA BEACH FL 32118 CITY-ST-ZIP TITLE VP ☐ Delete TITLE NAME Change ☐ Addition PATEL, MENENDRA NAME STREET ADDRESS 1515 S. REGWOOD AVE STREET ADDRESS CITY-ST-ZIP DAYTONA BEACH FL 32118 CITY-ST-ZIP TITLE ☐ Delete TITLE Change NAME Addition NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE

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

TITLE

NAME

STREET ADDRESS

CITY-ST-ZIP

SIGNATURE:

NAME

STREET ADDRESS

CITY-ST-7IP

SIGNATURE AND TYPED OF

☐ Delete

☐ Change

☐ Addition

FILED