

2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P99000022661

1. Entity Name

DESAI MAROLIA ENTERPRISE, INC.

FILED
Jan 27, 2000 8:00 am
Secretary of State

01-27-2000 90098 007 ***150.00

Principal Place of Business

Mailing Address

C/O COMFORT INN
16630 WEST HIGHWAY 441
MT. DORA FL 32757

C/O COMFORT INN
16630 WEST HIGHWAY 441
MT. DORA FL 32757-2223

2. Principal Place of Business

C/O QUALITY FOOD MART

3. Mailing Address

C/O QUALITY FOOD MART

Suite, Apt. #, etc.

5501 S.E. ABSHIER BLVD

Suite, Apt. #, etc.

5501 S.E. ABSHIER BLVD

City & State

BELLEVUE FL

City & State

BELLEVUE FL

Zip

34420

Country

Zip

34420

Country

4. FEI Number

59-3563713

Applied For

Not Applicable

5. Certificate of Status Desired

☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

MAROLINA, JANAK S
C/O COMFORT INN
16630 WEST HIGHWAY 441
MT. DORA FL 32757

Name

DESAI JANAK D.

Street Address (P.O. Box Number is Not Acceptable)

C/O QUALITY FOOD MART

5501 S.E. ABSHIER BLVD

City

BELLEVUE

FL

Zip Code

34420

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

Janak D. Desai

DESAI JANAK D V.P.

1/19/00

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, 2000 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 D ☐ Delete
NAME DESAI, JANAK D
STREET ADDRESS 4040 WEST SILVER SPRINGS BLVD.
CITY-ST-ZIP MT. DORA FL 32757

TITLE V.P. ☒ Change ☐ Addition
NAME DESAI JANAK D.
STREET ADDRESS 5425 S.E. 107th PL.
CITY-ST-ZIP BELLEVUE FL 34420

TITLE D ☐ Delete
NAME MAROLINA, MAHESH S
STREET ADDRESS 4040 WEST SILVER SPRINGS BLVD.
CITY-ST-ZIP MT. DORA FL 32757

TITLE P ☒ Change ☐ Addition
NAME MAROLIA MAHESH S.
STREET ADDRESS 4040 W-SILVER SPRINGS BLVD
CITY-ST-ZIP OCALA FL 34482

TITLE D ☐ Delete
NAME MAROLINA, JANAK D
STREET ADDRESS 4040 WEST SILVER SPRINGS BLVD.
CITY-ST-ZIP MT. DORA FL 32757

TITLE D ☒ Change ☐ Addition
NAME MAROLIA JANAK S
STREET ADDRESS 2701 REGAL POINT PLACE
CITY-ST-ZIP EUSTIS FL 32726

TITLE D ☐ Delete
NAME DESAI, THAKOR C
STREET ADDRESS 935 SPRINGFIELD ROAD
CITY-ST-ZIP MILLBRAE CA 94030

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

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

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

TITLE ☐ Delete
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)(f), 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:

Janak D. Desai

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

1/19/00

Date

(352) 629-8850

Daytime Phone #

CR2E034 (9/99)