FILED
May 15, 2002 8:00 am
Secretary of State

05-15-2002 90094 003 ***150.00

FOR PROFIT CORPORATION
UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # OLARON, INC. N/C Fk

1. Entity Name: P 99000023950

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business	3. Mailing Address
3801 NORTH FED. HWY	
POMPANO BEACH.	SAME AS PART
FLORIDA	2.
Zip 33064 County US	Zip County

DO NOT WRITE IN THIS SPACE

4. [illegible] 65-0951906

5. Certificate of Status Desired ☐ **$8.75** Additional Fee Required

DO NOT WRITE IN THIS SPACE

7. Name and Address of Current Registered Agent

Name: Shahrukh Dhanji

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

3801 N. FED HWY

City: POMPANO BEACH FL 33064

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 _____ DATE

(Signature, typed or printed name of Registered Agent and title if applicable.) (NOTE: Registered Agent signature required when changing)

9. The corporation is eligible to satisfy its Intangible Tax Filing requirement and elects to do so. (See criteria on back) ☐

January 1 - May 1 Fee is $150.00
After May 1 Fee is $550.00
Amended UBR is $61.25
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

TITLE NAME STREET ADDRESS CITY-ST-ZIP	PSTD Shahrukh Dhanji 3801 NORTH FEDERAL HIGHWAY POMPANO BEACH FL 33064
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CR2E034B (12/01)

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 on an attachment with an address, with all other like empowered.

SIGNATURE: S. Dhanji 4/30/02 President (954) 785-7885

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone