

**FOR PROFIT CORPORATION
UNIFORM BUSINESS REPORT (UBR)**

FILED
Apr 01, 2002 8:00 am
Secretary of State

04-01-2002 90621 037 ***225.00

DOCUMENT # **P99000050813** ✓
1. Entity Name **KUPONI PROPERTIES INC**

DO NOT WRITE IN THIS SPACE

B0055814

2. Principal Place of Business
2950 ALOMA AVE

3. Mailing Address
P.O. Box 5290

Suite, Apt. #, etc.
SUITE 402

Suite, Apt. #, etc.

DO NOT WRITE IN THIS SPACE

City & State
WINTER PARK, FL

City & State
WINTER PARK, FL

4. FEI Number
59-3608202

Applied For
Not Applicable

Zip
32792

Country
USA

Zip
32793

Country
USA

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
MITCHELL I. FRIED


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

238 N. WESTMONTE DRIVE STE 240

City
ALTAMONTE SPRINGS FL

Zip Code
32714

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

BHAGWAN ASNANI

3-14-02

(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) ☐

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
**PRESIDENT
BHAGWAN ASNANI
2605 VENETIAN WAY
WINTER PARK, FL 32789**

TITLE
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STREET ADDRESS
CITY-ST-ZIP

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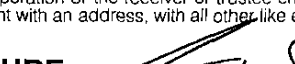
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IN THIS SPACE**

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:  **BHAGWAN ASNANI** 3/13/02 407 6787661
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

CR2E034B (12/01)