

2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P99000087098

1. Entity Name
ART ENTERPRISES OF ORLANDO, INC.

Principal Place of Business Mailing Address
1025 W. S.R. 434 1025 W. S.R. 434
WINTER SPRINGS FL 32708 WINTER SPRINGS FL 32708

2. Principal Place of Business 3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number

59-3600627

Applied For

Not Applicable

5. Certificate of Status Desired

☐

\$8.75 Additional Fee Required

DO NOT WRITE IN THIS SPACE

6. Name and Address of Current Registered Agent

THAKKER HIMAYSHU
1025 W. S.R. 434
WINTER SPRINGS FL 32708

7. Name and Address of New Registered Agent

Name

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

City

FL

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

H.R. Thakker

11/01/01

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

TITLE: DVP
NAME: THAKKER HIMAYSHU
STREET ADDRESS: 1025 W. S.R. 434
CITY-ST-ZIP: WINTER SPRINGS FL 32708 ☐ Delete

TITLE: DVP
NAME: KADAKIA ASHISH
STREET ADDRESS: 1025 W. S.R. 434
CITY-ST-ZIP: WINTER SPRINGS FL 32708 ☐ Delete

TITLE: ☐ Delete
NAME: ☐ Delete
STREET ADDRESS: ☐ Delete
CITY-ST-ZIP: ☐ Delete

TITLE: ☐ Delete
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TITLE: ☐ Delete
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STREET ADDRESS: ☐ Delete
CITY-ST-ZIP: ☐ Delete

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

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

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

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 all other like empowered.

SIGNATURE: H.R. Thakker

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

President

11/01/01

(407)-402-7586

FILED

01 NOV -2 PM 4:27

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

CR2E034 (9/99)

ART ENTERPRISES OF ORLANDO, INC.
1025 W S.R. 434
WINTER SPRINGS, FL. 32708

November 1, 2001

Secretary of State
Division of Corporation
P.O.Box 6327
Tallahassee Fl 32314

Ref:- Document #P99000087098
EIN:-59-3600627
Waiver of penalty

Dear Sir/Madam,

With reference to above, I undersigned THAKKER HIMANSHU President of ART ENTERPRISES OF ORLANDO, INC. would like to request you to waive the penalty for non-payment of Annual Filing Fees for 2001 on the following grounds.

I never received the Annual Filing Form for 2001, may be lost in the mail and/or delivered back to you, which was not forwarded to us. Unfortunatley, I never realized that I did not pay the annual filing fee for 2001 as I did not received the Filing Form for the year 2001. I made a mistake due to lack of knowledge and information. I would like to request you to waive the penalty on the basis of lack of knowledge, information and misunderstandings.

I am enclosing herewith the check of \$150.00 being an annaul filing fee for 2001 as an exceptional case. I assure you that this is not going to happen in the future, if I will receive the Form on or before due date. Please waive the penalty on the basis of lack of knowledge, information, misunderstanding and undue hardship in this bad economy. Thanking you in advance for your cooperation. Sorry for the inconvenience that caused to you.

Sincerely,

H.R. Thakker
(THAKKER HIMANSHU)

encl:- as above

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