2000 UNIFORM BUSINESS REPORT (UBR) FILED

DOCUMENT #	P990000944
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1. Entity Name

JAY SAIRAM ENTERPRISES INC.

Principal Place of Business P.O. BOX 80

Mailing Address

P.O. BOX 80

BOSTWICK FL 32007 BOSTWICK FL 32007



DATE

2. Principal Place of Business 3. Mailing Address				I INDINEGO KIN NEKA KORKI ORKI ANIKI NAKI NOKIL KOKIL NIKA DINDI KIRKI ANIK ANIK				
Suite, Apt. #, etc. Suite, Apt. #, etc.			DO NOT WRITE IN THIS SPACE					
City & State		City & State			4. FEI Number 59 - 3	60 5784	Applied For Not Applicable	
Zip	Country	Zip	Zip Cour		5. Certificate of Si	tatus Desired	\$8.75 Additional Fee Required	
6. Name and Address of Current Registered Agent				7. Name and Address of New Registered Agent				
PATEL, VIRENDRA 238 HWY. 17		Name PATEL VIRENDRA Street Address (P.O. Box Number is Not Acceptable)						
NORTH PALATKA FL 32177				238 HWY 17 NORTH City PALATKA FL Zip Code				
8. The above na	med entity submits this stateme	nt for the purpose of char	nging its registere				5 32177	

SIGNATURE (NOTE: Registered Agent signature required when reinstating)

9. This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so. (See criteria on back) П

FILE NOW!!! FEE IS-\$550.00 \$ 150 After SEPTEMBER 13, 2000 Min. will be \$750.00 Make Check Payable to Department of State

10. Election Campaign Financing Trust Fund Contribution.

\$5.00 May Be Added to Fees

OFFICERS AND DIRECTORS 12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 11. Defete Change ■ Addition TITLE TITLE PATEL, VIRENDRA NAME NAME P.O. BOX 80 STREET ADDRESS STREET ADDRESS **BOSTWICK FL 32007** CITY-ST-7IP CITY-ST-7/P TITI F ☐ Delete TITLE Change Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Delete TITLE Change Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP Addition ☐ Delete TITLE ☐ Change STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Delete TITLE ☐ Change Addition TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE ☐ Delete TITLE Change Addition NAME NAME STREET ADDRESS 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)(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.

PATEL

SIGNATURE:

Daytime Phone #

 To Florida Deep of State From: Jai Sairam Enterprises 2.
 Division of Corporations P.O.Box-80
P.O.Box - 6327 BOSTWICK, FL 32007
TALLAHASSEE FL 32314
 July 16 12, 2000
SUB: 2000 Uniform Business Report
Ref: Dozument # 79900094410
Fed to # 59-360.5784
 Dear Sorfmadan
I recently received a Second Notice for
2000 Uniform Business Report Filing Fees I would
like you to mention that, I never received
The original (First Notice) letter from your office
 until today. I therefore, would like to
apologize for not submitting the required fees
and the form until now
I have enclosed The cheek RA \$ 150 and
I hope that you will excuse me for the delay,
taking into account of circumstances beyond my
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Control.
Many Thanks
- Sahl
 VIRENDRA R. PATEL - PRESIDENT