FILED
May 22, 2001 8:00 am
Secretary of State
05-22-2001 90040 035 ***150.00

2001 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P99000104744

1. Entity Name
NET-ITI CONSULTING INC.

Principal Place of Business | Mailing Address

770066
DO NOT WRITE IN THIS SPACE

2. Principal Place of Business	3. Mailing Address
8201 PETERS ROAD	8201 PETERS ROAD
Suite, Apt. #, etc. SUITE 1000	Suite, Apt. #, etc. SUITE 1000
City & State PLANTATION FL	City & State PLANTATION, FL
Zip 33324 Country USA	Zip 33324 Country USA

4. FEI Number 65-0967937 ☐ Applied For ☐ Not Applicable

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

6. Name and Address of Current Registered Agent
KAREN L. KAYSER
5420 LYONS ROAD #108
COCONUT CREEK FL 33073

7. Name and Address of New Registered Agent
Name RAJ SRIDAR
Street Address (P.O. Box Number is Not Acceptable)
5101 SW 173rd Way
City Southwest Ranches **FL** Zip Code 33331

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] Sridar 04/30/01
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, 2001 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 / NAME / STREET ADDRESS / CITY-ST-ZIP	P/D PADMA VISWANATHAN, 5101 SW 173rd Way, Ft. Lauderdale FL 33331 ☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	T/V VICKY L. POUCHER, 4155 NW 113 Ave, SUNRISE FL 33323 ☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	Karen L. Kayser, 5420 Lyons Road # 108, Coconut Creek, FL 33073 ☒ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ Change ☐ Addition
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CR2E034 (11/00)

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: Padma Viswanathan 4/30/2001 954-916-2660
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #