

2000 UNIFORM BUSINESS REPORT (UBR)**DOCUMENT # S32431**

1. Entity Name

INDIA IMPORTS, INC.**FILED****Apr 18, 2000 8:00 am**
Secretary of State

04-18-2000 90001 001 ***150.00

Principal Place of Business

**2830 N. FORSYTH ROAD
SUITE 456
WINTER PARK FL 32792
US**

Mailing Address

**3157 CURRY WOODS CIR
ORLANDO FL 32857-4051**

050400

2. Principal Place of Business

1715 Morgans Mill Cr.

3. Mailing Address

1715 Morgans Mill Circle

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

Orlando, FL 32825

City & State

Orlando, FL 32825

4. FEI Number

59-3050207

Applied For

Not Applicable

Zip

Country

Zip

Country

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

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

**NAYYAR, VIJAY KUMAR
3157 CURRY WOODS CIR
ORLANDO FL 32822**

Name

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

1715 Morgans Mill Circle

City

Orlando**FL**

Zip Code

32825

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.

(NOTE: Registered Agent signature required when reinstating)

DATE

VIJAY K. NAYYAR [PD] 04/11/009. 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

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE **PD** ☐ Delete**NAYYAR, VIJAY KUMAR
3157 CURRY WOODS CIR
ORLANDO FL**TITLE ☒ Change ☐ Addition**1715 Morgans Mill Circle
Orlando, FL 32825**TITLE **STD** ☐ Delete**NAYYAR, VIJAY LUXAMI
3157 CURRY WOODS CIR
ORLANDO FL**TITLE ☒ Change ☐ Addition**1715 Morgans Mill Circle
Orlando, FL 32825**TITLE ☐ DeleteTITLE ☐ Change ☐ AdditionNAME
STREET ADDRESS
CITY-ST-ZIPNAME
STREET ADDRESS
CITY-ST-ZIPTITLE ☐ DeleteTITLE ☐ Change ☐ AdditionNAME
STREET ADDRESS
CITY-ST-ZIPNAME
STREET ADDRESS
CITY-ST-ZIPTITLE ☐ DeleteTITLE ☐ Change ☐ AdditionNAME
STREET ADDRESS
CITY-ST-ZIPNAME
STREET ADDRESS
CITY-ST-ZIPTITLE ☐ DeleteTITLE ☐ Change ☐ AdditionNAME
STREET ADDRESS
CITY-ST-ZIPNAME
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.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone # - 5200

VIJAY K NAYYAR 04/11/00 407-425

CR2E034 (9/99)