

2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # S71903

1. Entity Name

OMKARA SHANTI, INC.

FILED
May 15, 2000 8:00 am
Secretary of State

05-15-2000 90179 004 ***150.00

Principal Place of Business

12850 STATE ROAD 84
SUITE 6-7
DAVIE FL 33325
US

Mailing Address

12850 STATE ROAD 84
SUITE 6-7
DAVIE FL 33325-3321
US

2. Principal Place of Business

6700 Cypress Road

3. Mailing Address

6700 Cypress Road

Suite, Apt. # etc.

408

Suite, Apt. # etc.

408

City & State

Plantation, FL

City & State

Plantation

Zip

33317

Country

USA

Zip

33317

Country

USA

4. FEI Number

65-0284989

Applied For

Not Applicable

5. Certificate of Status Desired

☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

STEVENS, STACEY
12850 STATE ROAD 84
SUITE 6-7
DAVIE FL 33325

7. Name and Address of New Registered Agent

Name

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

6700 Cypress Road #408

City

Plantation

FL

Zip Code

33317

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

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 PD
NAME STEVENS, SUZI R.
STREET ADDRESS 12850 STATE ROAD 84 #6-7
CITY-ST-ZIP DAVIE FL

☐ Delete

TITLE VSTD
NAME STEVENS, STACEY R
STREET ADDRESS 12850 STATE ROAD 84 #6-7
CITY-ST-ZIP DAVIE FL

☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

☐ Delete

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE ☒ Change ☐ Addition
NAME
STREET ADDRESS 6700 Cypress Road #408
CITY-ST-ZIP Plantation, FL 33317

TITLE ☒ Change ☐ Addition
NAME
STREET ADDRESS 6700 Cypress Road #408
CITY-ST-ZIP Plantation, FL 33317

TITLE ☐ Change ☐ Addition
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CITY-ST-ZIP

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

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

TITLE ☐ Change ☐ Addition
NAME
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: Suzi R. Stevens Suzi R. Stevens 4/28/00 533-6487
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

CR2E034 (9/99)