

# 2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

**FILED**  
**Jun 13, 2003 8:00 am**  
**Secretary of State**

06-13-2003 90058 040 \*\*\*158.75

DOCUMENT # **V00627**

1. Entity Name  
**NAIK ENTERPRISES, INC.**



Principal Place of Business  
**3247 EMERSON STREET  
#1904  
JACKSONVILLE FL 32207  
US**

Mailing Address  
**3886 BIGGIN CHURCH ROAD W.  
#1904  
JACKSONVILLE FL 32224  
US**

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 **59-3098900**

Applied For

Not Applicable

5. Certificate of Status Desired ☒

**\$8.75** Additional  
Fee Required

☐ CHECK HERE IF MAKING CHANGES

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

**NAIK, NARENDRA K  
3247 EMERSON STREET  
JACKSONVILLE FL 32207**

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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

Signature, typed or printed name of registered agent and State if applicable

(SEE INSTRUCTIONS) Registered Agent signature required when reinstating

DATE

**FILE NOW!!! FEE IS \$150.00**

**After May 1, 2003. Fee will be \$550.00**

**Make Check Payable to Florida Department of State**

9. Election Campaign Financing  
Trust Fund Contribution. ☐

**\$5.00** May Be  
Added to Fees

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

| TITLE | NAME           | STREET ADDRESS             | CITY - ST - ZIP | <input type="checkbox"/> Delete | TITLE | NAME | STREET ADDRESS | CITY - ST - ZIP | <input type="checkbox"/> Change | <input type="checkbox"/> Addition |
|-------|----------------|----------------------------|-----------------|---------------------------------|-------|------|----------------|-----------------|---------------------------------|-----------------------------------|
| PS    | NAIK, NARENDRA | 3886 BIGGIN CHURCH ROAD W. | JACKSONVILLE FL | <input type="checkbox"/> Delete |       |      |                |                 | <input type="checkbox"/> Change | <input type="checkbox"/> Addition |
|       |                |                            |                 | <input type="checkbox"/> Delete |       |      |                |                 | <input type="checkbox"/> Change | <input type="checkbox"/> Addition |
|       |                |                            |                 | <input type="checkbox"/> Delete |       |      |                |                 | <input type="checkbox"/> Change | <input type="checkbox"/> Addition |
|       |                |                            |                 | <input type="checkbox"/> Delete |       |      |                |                 | <input type="checkbox"/> Change | <input type="checkbox"/> Addition |
|       |                |                            |                 | <input type="checkbox"/> Delete |       |      |                |                 | <input type="checkbox"/> Change | <input type="checkbox"/> Addition |
|       |                |                            |                 | <input type="checkbox"/> Delete |       |      |                |                 | <input type="checkbox"/> Change | <input type="checkbox"/> Addition |
|       |                |                            |                 | <input type="checkbox"/> Delete |       |      |                |                 | <input type="checkbox"/> Change | <input type="checkbox"/> Addition |
|       |                |                            |                 | <input type="checkbox"/> Delete |       |      |                |                 | <input type="checkbox"/> Change | <input type="checkbox"/> Addition |
|       |                |                            |                 | <input type="checkbox"/> Delete |       |      |                |                 | <input type="checkbox"/> Change | <input type="checkbox"/> Addition |

12. 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: *Narendra K. Naik* **NARENDRA K. NAIK** 6. 4. 03 904. 710. 4784

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2034 10/02

attachment

#V00627-90139511

UNIFORM BUSINESS REPORT  
DIVISIONS OF CORPORATIONS  
POBOX 1500  
TALLAHASSEE FL. 32302

Dear Sir/Madam

REF: DOCUMENT # V00627  
NAIK ENTERPRISES INC

Please find enclosed copied UBR, the original one is apparently lost in the mail which was filed around 21<sup>ST</sup> APRIL 03. Please accept the filing fee of \$158.75 and send me the certificate of status. Thank you so much.

Sincerely

Narendra Nair  
NARENDRA C NAIK PRESIDENT  
NAIK ENTERPRISES INC.