## 2000 UNIFORM BUSINESS REPORT (UBR) May 24, 2000 8:00 am Secretary of State **DOCUMENT # V08088** H & C RETIREMENT CENTER, INC. 05-24-2000 90033 031 \*\*\*150.00 Principal Place of Business Mailing Address 5605 NW 27TH CT 5605 NW 27TH COURT LAUDERHILL FL 33313-2307 LAUDERHILL FL 33313 US 2. Principal Place of Business 3. Mailing Address DO NOT WRITE IN THIS SPACE Suite, Apt. #, etc. Suite, Apt. #, etc. City & State 4. FEI Number Applied For \_ City & State 65-0345247 Not Applicable \$8.75 Additional Zip Country Zip Country 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Name RAMRUP, HANSRAM Street Address (P.O. Box Number is Not Acceptable) 2834 N.W. 55 AVENUE - 1B LAUDERHILL FL 33313 City 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. 4-27.00 SIGNATURE (NOTE: Registered Agent signature required when reinstating) FILE NOW!!! FEE IS \$150.00 9. This corporation is eligible to satisfy its Intangible \$5.00 May Be 10. Election Campaign Financing Tax filing requirement and elects to do so. After MAY 1, 2000 Fee will be \$550.00 Trust Fund Contribution. Added to Fees (See criteria on back) Make Check Payable to Department of State OFFICERS AND DIRECTORS 12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 11. ☐ Addition PTC ☐ Change Delete TITLE RAMRUP, HANSRAM NAME NAME STREET ADDRESS 5605 W 27TH COURT STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP LAUDERHILL FL ☐ Addition ☐ Change TITLE ☐ Delete TITLE RAMRUP, HANSRAM J NAME NAME STREET ADDRESS STREET ADDRESS 5605 W 27TH CT. CITY-ST-ZIP CITY-ST-ZIP LAUDERHILL FL TITLE Delete ☐ Change Addition RAMRUP, RAMCHAND NAME STREET ADDRESS 5606 NW 27TH COURT STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP LAUDERHILL FL Delete TITLE Addition TITLE RAMRUP, SOMMATTIE NAME NAME 5605 NW 27 CRT STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP LAUDERHILL FL Delete TITLE ☐ Change ☐ Addition TITLE RAMRUP, DAIRAM NAME NAME STREET ADDRESS STREET ADDRESS 2834 N.W. 55 AVENUE 1B CITY-ST-ZIP CITY-ST-ZIP LAUDERHILL FL 33313 Addition ☐ Change TITLE ☐ Defete TITLE

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.

NAME

STREET ADDRESS CITY-ST-ZIP

SIGNATURE: Hambaram Kannu

STREET ADDRESS

CITY-ST-ZIP

H/27/00 Daytime Phone #