

**2000 UNIFORM BUSINESS REPORT (UBR)****FILED****Apr 29, 2000 08:00 AM****Secretary of State****DOCUMENT # V34818**

1. Entity Name

ACCOUNTS RECEIVABLE PROFESSIONALS OF FLORIDA, INC.

Principal Place of Business

123 NW 13TH ST  
STE 214-4  
BOCA RATON  
33432

FL

US

Mailing Address

10863 JAPONICA COURT  
BOCA RATON  
33498

FL

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City &amp; State

City &amp; State

Zip

Country

Zip

Country

4. FEI Number

65-0339863

Applied For

Not Applicable

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

DO NOT WRITE IN THIS SPACE

**6. Name and Address of Current Registered Agent**

LAW OFFICE OF STEVEN GARELLEK,P.A.

7000 W. PALMETTO PARK ROAD

SUITE 400

BOCA RATON

FL

33433

US

**7. Name and Address of New Registered Agent**

Name

LAW OFFICE OF STEVEN GARELLEK,P.A.

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

7000 W. PALMETTO PARK ROAD

SUITE 200

City  
BOCA RATON

FL

Zip Code  
33433

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)

04/29/2000

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 ☐ Delete  
NAME  
STREET ADDRESS  
CITY-ST-ZIPTITLE ☐ Delete  
NAME STD  
MALHOTRA SURINDAR  
STREET ADDRESS 10863 JAPONICA COURT  
CITY-ST-ZIP BOCA RATON FL 33498TITLE ☐ Delete  
NAME PD  
MALHOTRA THRITY  
STREET ADDRESS 10863 JAPONICA COURT  
CITY-ST-ZIP BOCA RATON FL 33498TITLE ☐ Delete  
NAME  
STREET ADDRESS  
CITY-ST-ZIPTITLE ☐ Delete  
NAME  
STREET ADDRESS  
CITY-ST-ZIPTITLE ☐ Delete  
NAME  
STREET ADDRESS  
CITY-ST-ZIP**12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11**TITLE ☐ Change ☒ Addition  
NAME VPD  
MALHOTRA CYRUS  
STREET ADDRESS 10863 JAPONICA COURT  
CITY-ST-ZIP BOCA RATON FL 33498TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIPTITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIPTITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIPTITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIPTITLE ☐ 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: Thrity Melhotra

RD

04/29/2000