FILE NOW: FILING FEE AFTER MAY 1 IS \$550.00

PROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # F03846

(5)

FILED	
Apr 17 1997 8:00am	1
Secretary of State	

KAMLA ENTI	ERPRISES, INC.			9. k 20. a			1 1111 EVEN 1		!
Principal Place of Br		Mailing Address			The Maring S				i Biblioge
% B.S. PATEL 1901 SW 13TH STREET GAINESVILLE FL 32608		% B.S. PATEL 1901 SW 13TH STREET GAINESVILLE FL 32608-1530							
		•				3. Date Incorporated or Qualified 10/30/1980		te of Last R 15/1996	leport
2. Principal Place o	Business	2a. Mailing Address				4. FEI Number			oplied For
		4=-1	HE			59-2038352		No	ot Applicable
Suite Apt #. etc 22		Suite, Apt. #, etc.		:		5. Certificate of Status Desired		\$8.75 / Fee Re	Additional equired
City & State SATNES	VILLE, FL	City & State				Election Campaign Financing Trust Fund Contribution		\$5.00 Added t	May Be to Fees
Zip	Country	Zip	Cour	ntry		B. This corporation has liability for	intangible t	····	
24 32608	25 ALA-CHUA	29	30	_			Yes [
9.	Name and Address of Current I	Registered Agent				10. Name and Address of New Re	distered A	gent	
PATEL, B	3. \$.		(81	Name				
1901 SW	13TH STREET NLLE FL 32608			82	Street Addres	ss (P.O. Box Number is Not Acceptat	ole)		
Quito!	ILL I'E OLOGO		Ì	83					
			ĺ	84	City		FL	85 Zip (Code
office or registe	provisions of Sections 607.0502 a red agent, or both, in the State of illiar with, and accept the obligation	f Florida. Such change was	authorized	yd t	the corporation	ration submits this statement for the p in's board of directors. I hereby accep	urpose of	changing it sintment as	is registered registered
SIGNATURE		4.6	S45 E-				DAYE		
12.	rn, typed or printed name of registricid agent a OFFICERS AND I		13.	Agen	nt signature required	ADDITIONS/CHANGES TO OFFIC		DIRECTOR	S IN 12
тик Д		DELETE	1.1 10	LE		7,00111011070110100010011010111		Change	Addition
-	BB, GEORGE F.		1.2 NA					¥	
	15 N.W. 13TH ST.		1.3 ST	REET #	ADDRESS				
	INESVILLE FL		1.4 CIT		·				ļ
THE P		DELETE	2.1 TIT					Change	Addition
NAME PA	TEL, B.S.		22 NA	ME					
	O1 SW 13TH STREET		2.3 ST	REET A	ADDRESS				}
	INESVILLE FL		2 4 Ct	TY-SI	T-ZIP				
1111 0		☐ DELETE	3.1 TIT	LE				Change	Addition
	TEL, J S		3.2 NA	ME					
	O1 SW 13TH ST		3.3 \$1	REET A	address				ĺ
CITY-ST-ZIP GA	INESVILLE, FL 00000		3.4. Ci		1-ZIP				
TOTAL D		[]] DELETE	4.1 TIT					Change	Addition
	VAL, D		4. 2 N/						
	DI SW 13TH ST		1		address				ŀ
	INESVILLE, FL 00000	☐ DELETE	4.4 CII		-ZIP			Change	Additor
TILE VP		T percie	5.1 117				'	Change	Addition
	TEL, P.S.		5.2 NA		ADDDTOS				1
	DI SW 13TH ST.		1		ADDRESS				
City-St zip GA	inesville fl	DELETE	5.4 CD 6.1 Tit		- ZIP			Change	Addition
NAME		L. John C.	62 NA				1	— Oracilyc	L MUNICIAL
STREET ADDRESS					ADDRESS				l
									ľ
City-S1-7iP 14. Loo hereby cer	tily that the information supplied v	with this filing does not qua	6.4 C()			in Section 119.07(3)(i), Florida Statute	s. I further	certify that	the

Too horeby certify that the information supplied with this filling does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. Fluther certify that the information indicated on this annual report or supplemental annual report is true and accurate and that my signature shall have the same legal effect as if made under oath; that lam an officer or director of the copagnation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 12 or Block 13 if Thanged, or on an attachment with an address.