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PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State

DIVISION OF CORPORATIONS

1996

| DOCUMENT # | P93000086176 | (3) |
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| 1. Corooration Name | | ` ' |

NILA FOODS, INCORPORATED Mailing Address Principal Place of Business 4060 DELTONA BLVD. 4060 DELTONA BLVD. UNIT #9 LINIT #9 SPRING HILL FL 34606 SPRING HILL FL 34606 3a. Date of Last Report 3. Date Incorporated or Qualified 12/13/1993 05/01/1995 4. FEI Number Applied For 2. Principal Place of Business 2a. Mailing Address 59-3215148 Not Applicable 26 21 \$8.75 Additional Suite, Apt. #, etc Suite, Apt. #, etc 5. Certificate of Status Desired Fee Required 22 27 City & State City & State 6. Election Campaign Financing \$5.00 May Be \Box Trust Fund Contribution Added to Fees 23 28 8. This corporation has liability for intangible tax under s. 199.032, Zip Country Florida Statutes Yes □ No 30 25 29 24 10. Name and Address of New Registered Agent 9. Name and Address of Current Registered Agent 81 Name PATEL, PANKAJ Street Address (P.O. Box Number is Not Acceptable) 82 4060 DELTONA BLVD. UNIT #9 SPRING HILL FL 34606 Zip Code 84 City 85 11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes. (NOTE: Biogesternal Agent's goat are required wose recessing) Signature, typed or printed name of negistered agent and their appelation ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 OFFICERS AND DIRECTORS 13. 12 Change Add:tion DELETE 1 1 DILE TITLE PATEL, PANKAJ 1.2 NAMÉ NAME 4469 LAKE IN THE WOODS DR. 1.3 STREET ADORESS STREET ADDRESS SPRING HILL FL 1.4 CITY - ST - ZIP CITY - ST - ZIP Addition Change DELETE 2 1 TITLE TITLE PATEL, NILA 2.2 NAME NAME 4469 LAKE IN THE WOODS DR. STREET ADDRESS 2.3 STREET ADDRESS SPRING HILL FL CITY - ST - ZIF 2 4 CHY - S1 - ZIP DELETE Change Addition 3 1 HILLE TITLE 3.2 NAME NAME 3.3 STREET ADDRESS STREET ADDRESS 3.4 CiTY - S1 - ZIP CHTY-ST-ZIP DELETE Change Addition 4 1 117LE 1-TLE 4.2 NAME NAME 4.3 STREET ADDRESS STREET ADDRESS 4.4 CITY - ST. ZIP CITY - ST - ZIP [DELETE ☐ Change Addition 5.11006 TITLE 52 NAME NAME 5 3 STREET ADDRESS STREET ADDRESS 5.4 City - St - ZiP CITY-ST-ZIP Change Addition ☐ DELETE 6.1 Tift 6 TITLE

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), Florida Statutes. I further 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 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 12 or Block 13 if changed, or on an attachment with an address.

6.2 NAME

6.3 STREET ADDRESS

6.4.0(1Y-ST-7)P

SIGNATURE:

NAME

STREET ADDRESS

PANKAS PATEL APRIL 15'96 (353) 686 7500

CR2E034

(12/95)