## **FILED**

Mar 10, 1999 8:00 am Secretary of State 03-10-1999 90138 017 \*\*\*150.00

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

**PROFIT CORPORATION** ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE **Katherine Harris** 

Secretary of State DIVISION OF CORPORATIONS

DOCAN	MENT # <b>P97000</b>	089102		
1. Corporation HB UNIT				
Principal Place	of Business	Mailing Address		3 IODPHOBY IID 30711 \$001) DAIN ONNI ANIIN BANDA 18210 JAINE EIDIN BANAN 1191 LODI
1441 CLEARLAK	,	1441 CLEARLAKE RD		
COCOA FL 329		COCOA FL 32922		
US		US		DO NOT WRITE IN THIS SPACE
				3. Date Incorporated or Qualifed10/16/1997
2. Principal Pl	ace of Business	2a. Mailing Address		4. FEI Number Applied For
21		26		<b>59-3472931</b> Not Applicable
Suite, Apt. :	#, etc.	Suite, Apt. #, etc.		5. Certificate of Status Desired
City & State	9	City & State		6. Election Campaign Financing 55.00 May Be
23		28		Trust Fund Contribution Added to Fees
Zip	Country	Zip	Country 30	8. This corporation owes the current year Intangible Personal Property Tax.
24	9. Name and Address of Curren		30]	10. Name and Address of New Registered Agent
	3. Name and Address or Carren	. rregional de rigeni.	81 Name	
JOSHI, SURAIYA H			82 Street	et Address (P.O. Box Number is Not Acceptable)
1524 CLEARLAKE RD., #24 COCOA FL 32922			83	
			84 City	FL 85 Zip Code
				·
office or re	to the provisions of Sections 607.050: egistered agent, or both, in the State m familiar with, and accept the obligat	of Florida. Such change was au	ithonzed by the cort	d corporation submits this statement for the purpose of changing its registered poration's board of directors. I hereby accept the appointment as registered
SIGNATURE	in tallinar that, and addept in a sange	,		
- OIGHATORE	Signature, typed or printed name of registered ager		Registered Agent signature	
12.		D DIRECTORS  QELETE	13.	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12
TITLE	D AND AND AND AND AND AND AND AND AND AN	A SELESE	1.1 TITLE	
NAME	WILBURN, CHRISTOPHER A	ITE 4040	1.2 NAME	
STREET ADDRESS	2455 EAST SUNRISE BLVD SU	IIE 1210	1.3 STREET ADDRESS	8
CITY-ST-ZIP	FORT LAUDERDALE FL 33304	☐ DELETÉ	1.4 CITY- ST-ZIP 2.1 TITLE	Change Addition
TITLE		C Detere	2.2 NAME	
NAME			2.3 STREET ADDRESS	Joshi, Suraija T
STREET ADDRESS			2.4 CITY-ST-ZIP	Joshi, Suraiya H 1524 Clearlake Rd, 724 Cocoa Fl 32922
CITY-ST-ZIP TITLE		☐ DELETE	3.1 TITLE	Change Addition
NAME		<b>—</b>	3.2 NAME	
STREET ADDRESS			3.3 STREET ADDRESS	s)
CITY-ST-ZIP			3.4. CITY-ST-ZIP	
TITLE		☐ DELETE	4.1 TITLE	☐ Change ☐ Addition
NAME			4. 2 NAME	·
STREET ADDRESS			4.3 STREET ADDRESS	s •
CITY-ST-ZIP			4.4 CITY-ST-ZIP	
TITLE		☐ DELETE	5.1 ππLE	Change Addition
NAME			5.2 NAME	, , , , , , , , , , , , , , , , , , ,
STREET ADDRESS			5.3 STREET ADDRESS	S
CITY-ST-ZIP	<u></u>		5.4 CITY-ST-ZIP	
TITLE		☐ DELETE	6.1 TITLE	Change ☐ Addition
NAME			62 NAME	on l
STREET ADDRESS			6.3 STREET ADDRESS	
CITY-ST-ZIP			6.4 CITY - ST- ZIP	

CITY-ST-ZIP 14. 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 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, with all other like empowered.

SIGNATURE / 1/2