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

1. Corporation	MENT # S86799 S TMENTS, INC.	(1)			
Principal Place of Business 7 N COCOA BLYD COCOA FL 32822 US		Mailing Address 7 N COCOA BLVD COCOA FL 32822-7749 US			
					Date of Last Report 14/10/1996
¬¬ `	lace of Business	2a. Mailing Address		4. FEI Number 59-3088919	Applied For
Suite, Apt	#, etc	Suite, Apt. #, etc.			Not Applicable \$8.75 Additional
22	·	27		Certificate of Status Desired	Fee Required
City & State	e	City & State		6. Election Campaign Financing Trust Fund Contribution	\$5.00 May Be Added to Fees
Zip	Country	Zip	Country	8. This corporation has liability for intang	
24]	9, Name and Address of Currer	29	30		□ No
MAN	U, R. AMIN	it Registered Agent	81 Name	10. Name and Address of New Register	so Agent
	VINEYARD LAKE ROAD EAST		82 Street Add	dress (P.O. Box Number is Not Acceptable)	
JACI	KSONVILLE FL 32256				
			83		
			84 City		85 Zip Code
office or r agent. La SIGNATURE	to the provisions of Socialis 607,050 registered agent, or both, in the State in familiar with, and accept the oblig the state of the s		authorized by the corporal lorida Statutes. TE Registered Agent signature required.	rporation submits this statement for the purpos ation's board of directors. I hereby accept the	
12.		ID DIRECTORS	13.	ADDITIONS/CHANGES TO OFFICERS	·
FIFLE	DP	DELETE	1.1 THLE		Change Addition
NAME	amin, manu 9971 vineyard lake road i	EART	1.2 NAME		
STREET ADDRESS CITY- ST-ZIP	JACKSONVILLE FL	וטאב	1.3 STREET ADDRESS 1.4 CITY - ST - ZIP		
THE	DVP	DELETE	2.1 THILE	· · · · · · · · · · · · · · · · · · ·	Change Addition
NAME	SHAH, MAHESH		2.2 NAME		
STREET ADDRESS	7 NORTH COCOA BLVD COCOA FL		2.3 STREET ADDRESS		
CITY-ST-7IP TITLE	DS DS	DELETE	2. 4 CITY - ST - ZIP 3.1 TITLE	······································	Change Addition
NAME	SHAH, RASHMI		3 2 NAME		Light State of the
STREET ADDRESS	7 NORTH COCOA BLVD		3 3 STREET ADDRESS		x = x
CIPY - St - ZIP	COCOA FL	Decemen	3.4. CITY-ST-ZIP	·	
TITLE	DAS AMIN, SUMEDHA	☐ DELETE	4.1 TITLE 4.2 NAME		Change Addition
NAME STREET ADDRESS	9971 VINEYARD LAKE ROAD (EAST	4.2 NAME 4.3 STREET ADORESS		
COTY - ST - ZIP	JACKSONVILLE FL		4.4 CITY-ST-ZIP		
TILLE		☐ DELETE			Change Addition
NAME			5.2 NAME		
STREET ADDRESS			5.3 STREET ADDRESS	e ·	
CINY - ST - ZiFi Tille		DELETE	5.4 CITY-ST-ZIP 6.1 TITLE		Change Addition
NAME		Lond Provide	62 NAME		<u></u>
STREET AUDRESS			63 STREET ADDRESS		
CHY-ST-ZIF			64 CITY-SY-ZIP		
informatio	of includated on this armual report for a	supplemental annual report is:	true and accurate and the	ed in Section 119.07(3)(i), Florida Statutes. I fu at my signature shall have the same legal effec ort as required by Chapter 607, Florida Statute	et as if made under nath: that

SIGNATURE:

OFFICER OF DIRECTOR

97 46763/0245 Dayline Phone • 0102184

FILED

May 15 1997 8:00am

Secretary of State