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Apr 29, 1999 8:00 am  
Secretary of State

04-29-1999 90098 011 \*\*\*150.00

PROFIT  
CORPORATION  
ANNUAL REPORT  
1999



FLORIDA DEPARTMENT OF STATE  
Katherine Harris  
Secretary of State  
DIVISION OF CORPORATIONS

DOCUMENT # P96000078484

1. Corporation Name  
CAUSEWAY FINA, INC.



Principal Place of Business

Mailing Address

12300 BISCAYNE BLVD.  
MIAMI FL 33131

12300 BISCAYNE BLVD.  
MIAMI FL 33181

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

09/20/1996

4. FEI Number

65-0695482

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional  
Fee Required

6. Election Campaign Financing  
Trust Fund Contribution ☐

\$5.00 May Be  
Added to Fees

8. This corporation owes the current year intangible  
Personal Property Tax. ☐ Yes ☐ No

2. Principal Place of Business

2a. Mailing Address

21 12300 BISCAYNE BLVD.

26 SAME

Suite, Apt. #, etc.

Suite, Apt. #, etc.

22 City & State

27 City & State

23 MIAMI

28

24 Zip - 33131 Country MIAMI

29 Zip Country

30

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

PALIWAL, DINESH P  
110 N.W. 154 STREET  
MIAMI FL 33169

81 Name KURIYAL, GIRISH

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

110 NW 154 STREET

83 MIAMI

84 City

FL

85 Zip Code

33169

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.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable.

(NOT E: Registered Agent signature required when reinstating)

DATE

3/29/99

12. OFFICERS AND DIRECTORS

13.

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE P ☐ DELETE

NAME DUTT, SURENDRA  
STREET ADDRESS 110 N.W. 154 STREET  
CITY-STATE-ZIP MIAMI FL 33169

1.1 TITLE P

1.2 NAME

1.3 STREET ADDRESS

1.4 CITY-STATE-ZIP

TITLE VPS ☐ DELETE

NAME KURIYAL, GIRISH  
STREET ADDRESS 110 N.W. 154 STREET  
CITY-STATE-ZIP MIAMI FL 33169

2.1 TITLE VPS

2.2 NAME

2.3 STREET ADDRESS

2.4 CITY-STATE-ZIP

TITLE T ☐ DELETE

NAME PALIWAL, VIMAL  
STREET ADDRESS 110 N.W. 154 STREET  
CITY-STATE-ZIP MIAMI FL 33169

3.1 TITLE T

3.2 NAME

3.3 STREET ADDRESS

3.4 CITY-STATE-ZIP

TITLE ☐ DELETE

NAME  
STREET ADDRESS  
CITY-STATE-ZIP

4.1 TITLE

4.2 NAME

4.3 STREET ADDRESS

4.4 CITY-STATE-ZIP

TITLE ☐ DELETE

NAME  
STREET ADDRESS  
CITY-STATE-ZIP

5.1 TITLE

5.2 NAME

5.3 STREET ADDRESS

5.4 CITY-STATE-ZIP

TITLE ☐ DELETE

NAME  
STREET ADDRESS  
CITY-STATE-ZIP

6.1 TITLE

6.2 NAME

6.3 STREET ADDRESS

6.4 CITY-STATE-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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

3/29/99

305  
891-6732

CR2E034 (1/98)