FILE NOW: FILING FEE AF PROFIT CORPORATION ANNUAL REPORT 1998			FTER MAY 1ST IS \$550.00 FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS		FILED Apr 29 1998 8:00ar Secretary of State		
DOCUM 1. Corporation N S & K IN Principal Place o 4132 LAFAYETTE MARIANNA FL 3	TERNATIONAL, INCOR	PORATEC Mai	(7) iling Addross 32 LAFAYETTE ST. ARIANNA FL 32448				
US		US	6		DO NOT WRITE IN 3. Date Incorporated or Qualified	THIS SPACE	
			<u> </u>		11/03/1981	<u> </u>	
2. Principal Plac	e of Business	28. 26	Mailing Address		4. FEI Number 59-2139	765	pplied For of Applicabl
Suite, Apl. #,	etc.		Suite, Apt. #, etc.		5. Certificate of Status Desired	ר \$8.75	Additional
		27	City & State			Fee Re	equired
City & State		28	City & State		6. Election Campaign Financing \$5.00 May Be Trust Fund Contribution Added to Fees		
Zip	Country		Zip	Country	8. This corporation owes or has paid		
4	25 9. Name and Address of Cur	29 rent Registe	ered Agent	30	Personal Property Tax due June 30 10. Name and Address of New Regis		No
11. Purevent to	he provisions of Sections 607.	3502 and 60	7 1508 Florida Clot	84 City	noration submite this statement for the our	FL [Code
office or regi agent. I am f SIGNATURE	stered agent, or both, in the St amiliar with, and accept the ob	ate of Florida bligations of,	a Such change was Section 607:0505, F	tos, the above-named cor authorized by the corpora lorida Statutes.	poration submits this statement for the purp tion's board of directors. I hereby accept th	PL bose of changing it he appointment as	is registere
office or regi agent. I am f SIGNATURE	istered agent, or both, in the St amiliar with, and accept the ob output, lyped or profind name of registered OFFICERS /	ate of Florida bligations of, bagest and the it	a Such change was Soction 607.0505, F applicable (NO TORS	tos the above-named cor	ation's board of directors. I hereby accept the	Desc of changing it he appointment as	ts registere registered
office or regi agent. I am 1 SIGNATURE <u>Sig</u> 12.	istered agent, or both, in the St amiliar with, and accept the ob outpre, typed or pertind name of registered OFFICERS / PTD	ate of Florida bligations of, bagest and the it	a Such change was Section 607.0505, F	tos, the above-namod cor authorized by the corpora lorida Statutes. TE Registered Agent signature requ 13. 1.1 IILE	ition's board of directors. I hereby accept th	Desc of changing it he appointment as	ts registered registered
office or regiagent. I am f SIGNATURE 12. TITLE NAME	istered agent, or both, in the St lamiliar with, and accept the ob outpre, typed or profed name of registered OFFICERS / PTD PATEL, SUNIL	ate of Florida bligations of, bagest and the it	a Such change was Soction 607.0505, F applicable (NO TORS	tos, the above-namod cor authorized by the corpora lorida Statutes. 16 Registered Agent signature requ 13. 1.1 ITLE 1.2 NAME	ition's board of directors. I hereby accept th	Dese of changing if the appointment as DATE AS AND DIRECTOR	ts registere registered
office or regi agent. I am f SIGNATURE 12. 11LE NAME STREET ADDRESS CITY-ST-2IP	Intered agent, or both, in the St lamiliar with, and accept the ob OFFICERS / PTD PATEL, SUNIL 4132 LAFAYETTE STREET MARIANNA FL	ate of Florida bligations of, bagest and the it	a Such change was Section 607.0506, F Applicable (NO TORS	tos, the above-namod cor authorized by the corpora lorida Statutes. TE Registered Agent signature requ 13. 1.1 IILE	ition's board of directors. I hereby accept th	PL pose of changing if he appointment as DATE S AND DIRECTOR Change	ts registered registered RS IN 12
office or regiagent. I am f SIGNATURE SIGNATURE 12. 11LE STREET ADDRESS CITY-ST-2IP	In the Steered agent, or both, in the St lamiliar with, and accept the ob- OFFICERS / PTD PATEL, SUNIL 4132 LAFAYETTE STREET MARIANNA FL VSD	ate of Florida bligations of, bagest and the it	a Such change was Soction 607.0505, F applicable (NO TORS	tos, the above-namod cor authorized by the corpora lorida Statutes. 16: Registered Agent signature required 13: 1.1 IffLE 1.2 NAME 1.3 STREET ADDRESS 1.4 CHY-ST-ZIP 2.1 TITLE	ition's board of directors. I hereby accept th	Dese of changing if the appointment as DATE AS AND DIRECTOR	ts registered registered RS IN 12
office or regiagent. I am I SIGNATURE SIGNATURE 12. 12. STREET ADDRESS CITY-ST-ZIP TITLE NAME	Intered agent, or both, in the St lamiliar with, and accept the ob OFFICERS / PTD PATEL, SUNIL 4132 LAFAYETTE STREET MARIANNA FL VSD MADHU, PATEL	ate of Florid: aligations of agent and the it AND DIREC	a Such change was Section 607.0506, F Applicable (NO TORS	tos, the above-namod cor authorized by the corpora lorida Statutes. 16 Registered Agent signature required 13. 1.1 IIILE 1.2 NAME 1.3 STREET ADDRESS 1.4 CITY-ST-ZIP 2.1 TITLE 22 NAME	ition's board of directors. I hereby accept th	PL pose of changing if he appointment as DATE S AND DIRECTOR Change	ts registered registered RS IN 12
Office or regiagent. I am 1 SIGNATURE 12. 12. 13. 14. 17. 17. 17. 17. 17. 17. 17. 17. 17. 17	In the Steered agent, or both, in the St lamiliar with, and accept the ob- OFFICERS / PTD PATEL, SUNIL 4132 LAFAYETTE STREET MARIANNA FL VSD	ate of Florid: aligations of agent and the it AND DIREC	a Such change was Section 607.0506, F Applicable (NO TORS	tos, the above-namod cor authorized by the corpora lorida Statutes. 16: Registered Agent signature required 13: 1.1 IffLE 1.2 NAME 1.3 STREET ADDRESS 1.4 CHY-ST-ZIP 2.1 TITLE	ition's board of directors. I hereby accept th	PL pose of changing if he appointment as DATE S AND DIRECTOR Change	ts registered registered RS IN 12
Office or regiagent. I and I SIGNATURE SIGNATURE 12. 12. 11TLE NAME STREET ADDRESS CITY-ST-ZIP TITLE STREET ADDRESS CITY-ST-ZIP TITLE	Intered agent, or both, in the St lamiliar with, and accept the ob OFFICERS / PTD PATEL, SUNIL 4132 LAFAYETTE STREET MARIANNA FL VSD MADHU, PATEL 4132 LAFAYETTE, STREET	ate of Florid: aligations of agent and the it AND DIREC	a Such change was Section 607.0506, F Applicable (NO TORS	tos, the above-namod cor authorized by the corpora lorida Statutes. TE Registered Agent signature required 13. 1.1 TITLE 1.2 NAME 1.3 STREET ADDRESS 1.4 CITY - ST - ZIP 2.1 TITLE 2.2 NAME 2.3 STREET ADDRESS 2.4 CITY - ST - ZIP 3.1 TITLE	ition's board of directors. I hereby accept th	PL pose of changing if he appointment as DATE S AND DIRECTOR Change	ts registered registered RS IN 12 Additi
Office or regi agont. I and I SIGNATURE 12. TITLE NAME STREET ADDRESS CITY-ST-2IP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME NAME	Intered agent, or both, in the St lamiliar with, and accept the ob OFFICERS / PTD PATEL, SUNIL 4132 LAFAYETTE STREET MARIANNA FL VSD MADHU, PATEL 4132 LAFAYETTE, STREET	ate of Florid: aligations of agent and the it AND DIREC	a Such change was Section 607.0506, F applicate (NO LORS	tos, the above-namod cor authorized by the corpora lorida Statutes. 16 Registered Agent signature required 13. 1.1 IIILE 1.2 NAME 1.3 STREET ADDRESS 1.4 CITY-ST-ZIP 2.1 TITLE 2.2 NAME 2.3 STREET ADDRESS 2.4 CITY-ST-ZIP 3.1 TITLE 3.2 NAME	ition's board of directors. I hereby accept th	PL Dose of changing if he appointment as DA1E S AND DIRECTOF Change Change	ts registered registered RS IN 12 Addition
Office or regiagent. I and I SIGNATURE SIGNATURE 12. 11. 12. 11. 11. 11. 11. 11. 11. 11.	Intered agent, or both, in the St lamiliar with, and accept the ob OFFICERS / PTD PATEL, SUNIL 4132 LAFAYETTE STREET MARIANNA FL VSD MADHU, PATEL 4132 LAFAYETTE, STREET	ate of Florid: aligations of agent and the it AND DIREC	a Such change was Section 607.0506, F applicate (NO LORS	tos, the above-namod cor authorized by the corpora lorida Statutes. TE Registered Agent signature required 13. 1.1 TITLE 1.2 NAME 1.3 STREET ADDRESS 1.4 CITY - ST - ZIP 2.1 TITLE 2.2 NAME 2.3 STREET ADDRESS 2.4 CITY - ST - ZIP 3.1 TITLE	ition's board of directors. I hereby accept th	PL Dose of changing if he appointment as DA1E S AND DIRECTOF Change Change	ts registered registered RS IN 12 Addition
Office or regi agont. I and I SIGNATURE 12. TITLE NAME STREET ADDRESS CITY-ST-2IP TITLE STREET ADDRESS CITY-ST-2IP TITLE NAME STREET ADDRESS STREET ADDRESS	Intered agent, or both, in the St lamiliar with, and accept the ob OFFICERS / PTD PATEL, SUNIL 4132 LAFAYETTE STREET MARIANNA FL VSD MADHU, PATEL 4132 LAFAYETTE, STREET	ate of Florid: aligations of agent and the it AND DIREC	a Such change was Section 607.0506, F applicate (NO LORS	tos, the above-namod cor authorized by the corpora lorida Statutes. 16 Registered Agent signature required 13. 1.1 IIILE 1.2 NAME 1.3 STREET ADDRESS 1.4 CITY-ST-ZIP 2.1 TITLE 2.2 NAME 2.3 STREET ADDRESS 2.4 CITY-ST-ZIP 3.1 TITLE 3.2 NAME 3.3 STREET ADDRESS	ition's board of directors. I hereby accept th	PL Dose of changing if he appointment as DA1E S AND DIRECTOF Change Change	Is registere registered RS IN 12 Addition Addition
Office or regi agont. I and I SIGNATURE 12. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME NAME NAME NAME	Intered agent, or both, in the St lamiliar with, and accept the ob OFFICERS / PTD PATEL, SUNIL 4132 LAFAYETTE STREET MARIANNA FL VSD MADHU, PATEL 4132 LAFAYETTE, STREET	ate of Florid: aligations of agent and the it AND DIREC	a Such change was Section 607.0506, F Implicable (NO TORS DELETE DELETE	tos, the above-namod cor authorized by the corpora lorida Statutes. 18 Registered Agent signature required 13. 1.1 IIILE 1.2 NAME 1.3 STREET ADDRESS 1.4 CITY-ST-ZIP 2.1 TITLE 2 NAME 2 3 STREET ADDRESS 2.4 CITY-ST-ZIP 3.1 TITLE 3.2 NAME 3.3 STREET ADDRESS 3.4. CITY-ST-ZIP 4.1 TITLE 4.2 NAME	ition's board of directors. I hereby accept th	Change	Is registered registered RS IN 12 Addition Addition
Office or regi agont. I am 1 SIGNATURE 12. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE STREET ADDRESS CITY-ST-ZIP TITLE STREET ADDRESS STREET ADDRESS STREET ADDRESS	Intered agent, or both, in the St lamiliar with, and accept the ob OFFICERS / PTD PATEL, SUNIL 4132 LAFAYETTE STREET MARIANNA FL VSD MADHU, PATEL 4132 LAFAYETTE, STREET	ate of Florid: aligations of agent and the it AND DIREC	a Such change was Section 607.0506, F Implicable (NO TORS DELETE DELETE	tos, the above-namod cor authorized by the corpora lorida Statutes. 18 Registered Agent signature required 13. 1.1 IIILE 1.2 NAME 1.3 STREET ADDRESS 1.4 CITY-ST-ZIP 2.1 TITLE 2.2 NAME 2.3 STREET ADDRESS 2.4 CITY-ST-ZIP 3.1 TITLE 3.2 NAME 3.3 STREET ADDRESS 3.4. CITY-ST-ZIP 4.1 TITLE	ition's board of directors. I hereby accept th	Change	Is registered registered RS IN 12 Addition Addition
Office or regi agont. I and I SIGNATURE 12. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME NAME NAME NAME	Intered agent, or both, in the St lamiliar with, and accept the ob OFFICERS / PTD PATEL, SUNIL 4132 LAFAYETTE STREET MARIANNA FL VSD MADHU, PATEL 4132 LAFAYETTE, STREET	ate of Florid aligations of agent and the it AND DIREC	a Such change was Section 607.0506, F Implicable (NO TORS DELETE DELETE	tos, the above-namod cor authorized by the corpora lorida Statutes. 18 Registered Agent signaturo requinant 1.1 IIILE 1.2 NAME 1.3 STREET ADDRESS 1.4 CITY-ST-ZIP 2.1 TITLE 2.2 NAME 2.3 STREET ADDRESS 2.4 CITY-ST-ZIP 3.1 TITLE 3.2 NAME 3.3 STREET ADDRESS 3.4 CITY-ST-ZIP 4.1 TITLE 4.2 NAME 4.3 STREET ADDRESS	ition's board of directors. I hereby accept th	Change	Is registere registered RS IN 12 Addition Addition Addition
Office or regi agont. I and I SIGNATURE 12. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME	Intered agent, or both, in the St lamiliar with, and accept the ob OFFICERS / PTD PATEL, SUNIL 4132 LAFAYETTE STREET MARIANNA FL VSD MADHU, PATEL 4132 LAFAYETTE, STREET	ate of Florid aligations of agent and the it AND DIREC	a Such change was Soction 607.0506, F Applicable (NO TORS DELETE DELETE DELETE DELETE	tos, the above-namod corr authorized by the corpora lorida Statutes. 18 Registered Agent signaturo required 13 . 1.1 INTLE 1.2 NAME 1.3 STREET ADDRESS 1.4 CHY-ST-ZIP 2.1 THLE 2.2 NAME 2.3 STREET ADDRESS 2.4 CHY-ST-ZIP 3.1 THLE 3.2 NAME 3.3 STREET ADDRESS 3.4 CHY-ST-ZIP 4.1 THLE 4.2 NAME 4.3 STREET ADDRESS 4.4 CHY-ST-ZIP 5.1 THLE 5.2 NAME	ition's board of directors. I hereby accept th	PL Dose of changing if Dose of changing if Dose of changing if Dose of change Change Change Change Change	Is registere registered RS IN 12 Addition Addition Addition
Office or regi agent. 1 and 1 SIGNATURE 12. 11. STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP	Intered agent, or both, in the St lamiliar with, and accept the ob OFFICERS / PTD PATEL, SUNIL 4132 LAFAYETTE STREET MARIANNA FL VSD MADHU, PATEL 4132 LAFAYETTE, STREET	ate of Florid aligations of agent and the it AND DIREC	a Such change was Soction 607.0506, F Applicable (NO TORS DELETE DELETE DELETE DELETE	tos, the above-namod corr authorized by the corpora forida Statutes. TE-Registered Agent signaturo required 13. 1.1 IITLE 1.2 NAME 1.3 STREET ADDRESS 1.4 CITY-ST-ZIP 2.1 TITLE 2.2 NAME 2.3 STREET ADDRESS 2.4 CITY-ST-ZIP 3.1 TITLE 3.2 NAME 3.3 STREET ADDRESS 3.4 CITY-ST-ZIP 4.1 TITLE 4.2 NAME 4.3 STREET ADDRESS 4.4 CITY-ST-ZIP 5.1 TITLE 5.2 NAME 5.3 STREET ADDRESS	ition's board of directors. I hereby accept th	PL Dose of changing if Dose of changing if Dose of changing if Dose of change Change Change Change Change	Is registere registered RS IN 12 Addition Addition Addition
Office or regi agont. I and I SIGNATURE 12. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME	Intered agent, or both, in the St lamiliar with, and accept the ob OFFICERS / PTD PATEL, SUNIL 4132 LAFAYETTE STREET MARIANNA FL VSD MADHU, PATEL 4132 LAFAYETTE, STREET	ate of Florid aligations of agent and the it AND DIREC	a Such change was Soction 607.0506, F Applicable (NO TORS DELETE DELETE DELETE DELETE	tos, the above-namod corr authorized by the corpora lorida Statutes. 18 Registered Agent signaturo required 13 . 1.1 INTLE 1.2 NAME 1.3 STREET ADDRESS 1.4 CHY-ST-ZIP 2.1 THLE 2.2 NAME 2.3 STREET ADDRESS 2.4 CHY-ST-ZIP 3.1 THLE 3.2 NAME 3.3 STREET ADDRESS 3.4 CHY-ST-ZIP 4.1 THLE 4.2 NAME 4.3 STREET ADDRESS 4.4 CHY-ST-ZIP 5.1 THLE 5.2 NAME	ition's board of directors. I hereby accept th	PL Dose of changing if Dose of changing if Dose of changing if Dose of change Change Change Change Change	Is registere registered RS IN 12 Addition Addition Addition Addition
Office or regi agont. I am 1 SIGNATURE 12. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP	Intered agent, or both, in the St lamiliar with, and accept the ob OFFICERS / PTD PATEL, SUNIL 4132 LAFAYETTE STREET MARIANNA FL VSD MADHU, PATEL 4132 LAFAYETTE, STREET	ate of Florid aligations of agent and the it AND DIREC	a Such change was Soction 607.0506, F Applicatue (NO TORS DELETE DELETE DELETE DELETE DELETE	tos, the above-namod corr authorized by the corpora lorida Statutes. 18 Registered Agent signature requires 13 . 1.1 INTLE 1.2 NAME 1.3 STREET ADDRESS 1.4 CHY-ST-ZIP 2.1 THLE 2.2 NAME 2.3 STREET ADDRESS 2.4 CHY-ST-ZIP 3.1 THLE 3.2 NAME 3.3 STREET ADDRESS 3.4 CHY-ST-ZIP 4.1 THLE 4.2 NAME 4.3 STREET ADDRESS 4.4 CHY-ST-ZIP 5.1 THLE 5.2 NAME 5.3 STREET ADDRESS 5.4 CHY-ST-ZIP	ition's board of directors. I hereby accept th		Is registere registered RS IN 12 Addition Addition Addition Addition
Office or regi agont. I am 1 SIGNATURE 12. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE	Intered agent, or both, in the St lamiliar with, and accept the ob OFFICERS / PTD PATEL, SUNIL 4132 LAFAYETTE STREET MARIANNA FL VSD MADHU, PATEL 4132 LAFAYETTE, STREET	ate of Florid aligations of agent and the it AND DIREC	a Such change was Soction 607.0506, F Applicatue (NO TORS DELETE DELETE DELETE DELETE DELETE	tos, the above-namod corr authorized by the corpora lorida Statutes. 18 Registered Agent signaturo required 13 . 1.1 ITILE 1.2 NAME 1.3 STREET ADDRESS 1.4 CITY-ST-ZIP 2.1 TITLE 2.2 NAME 2.3 STREET ADDRESS 2.4 CITY-ST-ZIP 3.1 TITLE 3.2 NAME 3.3 STREET ADDRESS 3.4 CITY-ST-ZIP 4.1 TITLE 4.2 NAME 4.3 STREET ADDRESS 4.4 CITY-ST-ZIP 5.1 TITLE 5.2 NAME 5.3 STREET ADDRESS 5.4 CITY-ST-ZIP 6.1 TITLE	ition's board of directors. I hereby accept th		ts registere registered

ł