FILE NOW: FILING FEE AFTER MAY 1 IS $225.00

PROFIT CORPORATION ANNUAL REPORT

1996

FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # **F73781** **(9)**

1. Corporation Name

MEERA TRADING INCORPORATED

Principal Place of Business

1808 NW 83 DRIVE
CORAL SPRINGS FL 33071

Mailing Address

1777 BLACKFOOT DRIVE
FREMONT CA 94539
US

3. Date Incorporated or Qualified: **03/26/1982**

3a. Date of Last Report: **04/28/1995**

4. FEI Number: **59-2180037** [ ] 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

2. Principal Place of Business

21
22 Suite, Apt. #, etc.
23 City & State
24 Zip
25 County

2a. Mailing Address

26
27 Suite, Apt. #, etc.
28 City & State
29 Zip
30 County

8. This corporation has qualify for intangible tax under s. 199.052, Florida Statutes. [ ] Yes [ ] No

9. Name and Address of Current Registered Agent

SHAH, KIRIT
1808 NWN83 DRIVE
CORAL SPRINGS FL 33071

10. Name and Address of New Registered Agent

81 Name
82 Street Address (P.O. Box Number is Not Acceptable)
83
84 City **FL** 85 Zip Code

11. Pursuant to the provisions of Sections 607.0502 and 607.1505, 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

DATE

12. OFFICERS AND DIRECTORS

TITLE	**PTC**	[ ] DELETE
NAME	**KUMBHANI, ROHIT N.**	
STREET ADDRESS	**1777 BLACKFOOT DR.**	
CITY-ST-ZIP	**FREMONT CA**	
TITLE	**VD**	[ ] DELETE
NAME	**KUMBHANI, SADHANA R**	
STREET ADDRESS	**1777 BLACKFOOT DR.**	
CITY-ST-ZIP	**FREMONT CA**	
TITLE		[ ] DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		[ ] DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		[ ] DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		[ ] DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1 TITLE		[ ] Change [ ] Addition
2 NAME		
3 STREET ADDRESS		
4 CITY-ST-ZIP		
5 TITLE		[ ] Change [ ] Addition
6 NAME		
7 STREET ADDRESS		
8 CITY-ST-ZIP		
9 TITLE		[ ] Change [ ] Addition
10 NAME		
11 STREET ADDRESS		
12 CITY-ST-ZIP		
13 TITLE		[ ] Change [ ] Addition
14 NAME		
15 STREET ADDRESS		
16 CITY-ST-ZIP		
17 TITLE		[ ] Change [ ] Addition
18 NAME		
19 STREET ADDRESS		
20 CITY-ST-ZIP		
21 TITLE		[ ] Change [ ] Addition
22 NAME		
23 STREET ADDRESS		
24 CITY-ST-ZIP		

14. I do hereby certify that the information supplied with this filing is substantially form-neutral and 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 attached sheet with an address.

SIGNATURE: Rohit Kumbhani 4/23/96 510-226-9461

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone Number

ROHIT KUMBHANI

CR2E034 (12/95)