

FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

PROFIT
CORPORATION
ANNUAL REPORT
1996



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

DOCUMENT # F95000005246 (2)

1. Corporation Name

HARPAL INVESTMENT CORP.

Principal Place of Business

5783 SW 40TH STREET
MIAMI FL 33155

Mailing Address

5783 SW 40TH STREET
MIAMI FL 33155



2. Principal Place of Business

2a. Mailing Address

21

26

3. Date Incorporated or Qualified

3a. Date of Last Report

10/26/1995

4. FEI Number

65-0590413

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 has liability for intangible tax under s. 199.032,
Florida Statutes: ☒ Yes ☐ No

State, Apt., etc.

State, Apt., etc.

City & State

City & State

Zip

Zip

Country

Country

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

DAVINDER, ARORA
5783 SW 40TH ST.
MIAMI FL 33155

81. Name

N/A

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

83

84. City

FL

85. Zip Code

11. Pursuant to the provisions of Sections 607.0702 and 607.1405, 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 607.0905, Florida Statutes.

SIGNATURE

Printed Name (Agent or registered agent with authority)

Date

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1. NAME ☐ DELETE

PCD
DAVINDER, ARORA
5783 SW 40TH ST.
MIAMI FL

2. NAME ☐ DELETE

VD
AHLI, PRITPAL
5783 SW 40TH ST.
MIAMI FL

3. NAME ☐ DELETE

S
JOLLY, PREET K
5783 SW 40TH ST.
MIAMI FL

4. NAME ☐ DELETE

T
ARORA, GURBAKSH S
5783 SW 40TH ST.
MIAMI FL

5. NAME ☐ DELETE

6. NAME

7. NAME

8. NAME

9. NAME

10. NAME

11. NAME

12. NAME

13. NAME

14. NAME

15. NAME

16. NAME

17. NAME

18. NAME

19. NAME

20. NAME

1. TITLE

2. NAME

3. STREET ADDRESS

4. CITY, ST, ZIP

5. TITLE

6. NAME

7. STREET ADDRESS

8. CITY, ST, ZIP

9. TITLE

10. NAME

11. STREET ADDRESS

12. CITY, ST, ZIP

13. TITLE

14. NAME

15. STREET ADDRESS

16. CITY, ST, ZIP

17. TITLE

18. NAME

19. STREET ADDRESS

20. CITY, ST, ZIP

21. TITLE

22. NAME

23. STREET ADDRESS

24. CITY, ST, ZIP

25. TITLE

26. NAME

27. STREET ADDRESS

28. CITY, ST, ZIP

29. TITLE

30. NAME

31. STREET ADDRESS

32. CITY, ST, ZIP

33. TITLE

34. NAME

35. STREET ADDRESS

36. CITY, ST, ZIP

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SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

DAYINDER ARORA

1/23/96 (305) 666-1134

CR2E034 (12/95)