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PROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # G51478

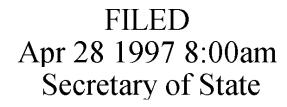
BHATTI BUILDER, INC.

Principal Place of Business

11201 NW 14TH STREET

Mailing Address

11201 NW 14TH STREET





PLANTATION FL 33317 US		PLANTATION F 33323-2437 US							
••						3. Date Incorporated or Qualified 07/27/1983		te of Last)5/1996	
2. Principal Pi	ace of Business	2a. Mailing Address				4. FEI Number		,	Applied For
21		26				59-2305411	· · · · · · · · · · · · · · · · · · ·		Not Applicable
Sulte, Apt. :	#, etc.	Suite, Apt. #, etc.			5. Certificate of Status Desired			Additional Required	
City & State	9	City & State				Election Campaign Financing Trust Fund Contribution			O May Be
23 Zip	Country	28	Coun	itry		8. This corporation has liability for i			
24	25	29	30	,			Yes [5. 189,032,
==1	9. Name and Address of Curren					10. Name and Address of New Re			
BHA	TTI, JASWANT S.			B1	Name		······		
1120)1 NW 14TH STREET				Charles A delet	/D C D N - I - I - I - I - I			
	NTATION FL 33323			B2	Street Addi	ress (P.O. Box Number is Not Acceptab		···	
				83					
			6	B4	City		FL	85 Zi	p Code
office or re	to the provisions of Sections 607.050 egistered agent, or both, in the State m familiar with, and accept the obligi	of Florida, Such change was	authorized.	Đ٧	the corporal	poration submits this statement for the p tion's board of directors. I heroby accep	urpose of the app	changing pintment a	its registered as registered
SIGNATURE	Signature, typod or printed name of registered ago	ort and title if applicable (NO	TE Registered	Agei	nt signature requi	red when reinstaling)	DATE		
12.	OFFICERS AN		13.	-		ADDITIONS/CHANGES TO OFFIC		DIRECTO	ORS IN 12
TITLE	PD	DELETE	1.1 7(1)	.f.				Chang	e Addition
NAME	BHATTI, JASWANT S		1.2 NAN	ME.					ļ
STREET ADDRESS	11201 NW 14TH STREET		1.3 STR	EET.	ADDRES\$				ļ
CITY-ST-ZIP	PLANTATION FL		1.4 CITY	Y - S1	T-ZIP	•			ļ
TITLE		DELETE	2.1 1ITL	E				Change	e Addition
NAME			2.2 NAN	WE					
STREET ADDRESS			2.3 STR	REE1.	ADDRESS				ļ
CITY-ST-ZIP			2. 4 CI1	Y - S	S1 - 21P				<u>-</u>
TITLE		□ DFLE1E	3.1 T(TL	.Ε		. •	•	Change	e Addition
NAME			3.2 NAN	ИE					ļ
STREET ADDRESS			3.3 S1R	REELT	ADDRESS				
CITY-ST-ZIP			3.4. CIT		61 · 7/P				
TITLE		☐ DELĒTE	4 1 1 I T L					Change	e 🛄 Addition
NAME			4. 2 NAI						ļ
STREET ADDRESS	7.		4 3 STA	EEF	ADDRESS				ļ
CITY-ST-ZIP			4.4 CIT		T-ZIP			<u> </u>	
TITLE		☐ DELETE	5.1 1110					Chang	e 🔲 Addition
NAME			5.2 NAM						
STREET ADDRESS					ADDRESS				
CITY-ST-ZIP		Driver	5.4 CH1		1 · ZIP			06	Addres.
TITLE		☐ DELETE	6.1 1/11					Chang	e L Addition
NAME			6.2 NAN						
STREET ADDRESS					ADDRESS				
CITY-ST-ZIP			6.4 CIT	Y - 5	T- 71P				

14. I do 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.