FILE NOW: FILING FEE AFTER MAY 1 IS \$550.00

PROFIT CORPORATION ANNUAL REPORT

1997

Principal Place of Business



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # H38566

(6)

Mailing Address

SRI GANESH FINANCIAL CORPORATION

FILED Apr 23 1997 8:00am Secretary of State

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7929 LYONS MARTON GR	ST. OVE IL 60053	7929 LYONS ST. MARTON GROVE IL 8005	3-1636		
				3. Date Incorporated or Qualified 01/18/1985	3a. Date of Last Report 08/01/1996
2. Principa	Place of Business	2a. Mailing Address		4. FEI Number	Applied For
21		26	· · · · · · · · · · · · · · · · · · ·	59-2483389	Not Applicable
22	ot # etc.	Suite, Apt. #, etc.		5. Certificate of Status Desired	\$8.75 Additional Fee Required
Oity & St 23		City & State		Election Campaign Financing Trust Fund Contribution	\$5.00 May Be Added to Fees
Zip '''' 1	Country	Zip	Country	8. This corporation has liability for	
24	25	29	30	Florida Statutes 10. Name and Address of New R	Yes No
	9. Name and Address of	Current Hegistered Agent	81 Nan		egistered Agent
	ATEL, ROHIT C.		[Naii		
	58 SW 23RD CRANBACULE DYNTON BEACH FL 33436	DR		et Address (P.O. Box Number is Not Accepta	ible)
			63		
			84 City	7.7	FL 85 Zip Code
11. Pursuar office o agent.	nt to the provisions of Sections 6 ir registered agent, or both, in thi Lam familiar with, and accept the	07.0502 and 607.1508, Florida Statu e State of Florida, Such change was e obligations of, Section 607.0505, F	ites, the above-nam authorized by the c lorida Statutes.	ed corporation submits this statement for the orporation's board of directors. I hereby acce	purpose of changing its registered ept the appointment as registered
SIGNATURI	Signative, by end or puriting at attentour regis	toraid agent and tills it arrelicable. (NO	TE: Booistered Agent signa	ure regulted when reinstating)	DATE
12.		RS AND DIRECTORS	13.	ADDITIONS/CHANGES TO OFF	
hluf	PD	☐ DELETE	11 TITLE		Change Addition
NAME	PATEL, ROHIT C.		1.2 NAME		
STREET ADDRES		<i>r</i> E.	1.3 STREET ADDRES	s	
CDY SEZP	CHICAGO IL		1.4 CITY+ST-ZIP		
TIME:	D	DELETE	2 1 TITLE		Change Addition
NAM:	PATEL, SAROJ R.		2.2 NAME		
STREET ADDRESS	3409 N. SOUTHPORT AV	Æ.	2.3 STREET ADDRES	s	
C Fr St 7P	CHICAGO IL		2. 4 CITY-ST-ZIP		
Title		DELETE	3.1 THLE	· ·	📜 🛄 Change 🔲 Addition
NAME			3.2 NAME		
STEEL ADDRES	8		3.3 STREET ADDRES	s	
City-51-7iP			3.4. CITY-\$1-ZIP		
1111.6		☐ DELETE	4.1 TITLE		Change Addition
SAME			4. 2 NAME		
STREET AD INCS	5		4.3 STREET ADDRES	s J	
CHY ST Z#			4.4 CITY - ST - ZIP		
THE		[] DELETE	5.1 TITL€		Change Addition
NAME:			5.2 NAME		
STREET ADDRES	8		5.3 STREET ADDRES	s	
Di'Y \$1 7			5.4 CITY - ST - ZIP		·
hid		DELETE	6.1 TIFLE		☐ Change ☐ Addition
NAME			62 NAME		
SPREET ADDRES	\$		6.3 STREET ADDRES	s	
CFTY - \$1 - Z/P	E		64 CITY - ST - ZIP		

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 eath, 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.

SIGNATURE:

NATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

1/18/97 847.967.0466

1034 (3/36)