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

PROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

**FILED** 

Feb 02 1998 8:00am

Secretary of State

Secretary of State
DIVISION OF CORPORATIONS

**DOCUMENT #** 

H56079

(7)

Principal Plac	ATI, INC.	Mailing Address				
4520 EAU GALLIE BLVD. MELBOURNE FL 32834 US		4520 EAU GALLIE BLVD. MELBOURNE FL 32834 US		DO NOT WRITE IN THIS SPACE		
					3. Date Incorporated or Qualified	
2. Principal P	Principal Place of Business 2a. Mailing Address				05/08/1985 4. FEI Number	Applied Fc
Suite, Apt. #, etc.		Suile, Apt. #, etc.		59-2552392		
22	27				5. Certificate of Status Desired	
City & State		City & State		6. Election Campaign Financing	<u>-</u>	
23 28					Trust Fund Contribution	Added to Fees
<b>Z</b> ip <b>24</b> ]			Count	ry	8. This corporation owes or has paid the ci	P***
141	9. Name and Address of Current		30		Personal Property Tax due June 30.  10. Name and Address of New Registered	
GA	INDHI, HEMANT R.		8	1 Name	10.	- rigoni
	2 LANTERNBK DR		8:	2 Street Add	dress (P.O. Box Number is Not Acceptable)	Applied For Not Applicable \$8.75 Additional Fee Required ancing \$5.00 May Be Added to Fees or has paid the current year Intangible due June 30 Yes No New Registered Agent  Acceptable)  FL 85 Zip Code for the purpose of changing its registered by accept the appointment as registered by accept the appointment as registered Change Addition  Change Addition  Change Addition  Change Addition
	TELLITE BCH FL 32937				sices (1.0. Box Namber 15 Not Acceptable)	
			8:	3		
			84	City	F1	85 Zip Code
11. Pursuant t	to the provisions of Sections 607 0502	and 607 1508. Florida Statute	es the above	ve-named co	recration submits this statement for the purpose	of changing its societs
office or re agent. I as	egistered agent, or both, in the State of the familiar with, and accept the obligation	of Florida, Such change was a tions of, Section 607,0505, Flo	uthorized t rida Statule	by the corpora	alion's board of directors. Thereby accept the ap	pointment as registere
SIGNATURE						
12,	Signature, typed or printed nank of registered agen			geril signalure requ		
TITLE	OFFICERS AND	DELETE	13.		ADDITIONS/CHANGES TO OFFICERS AN	
NAME	GANDHI, HEMANT R.		1.2 NAME			Li Cuange Li Mud
STREET ADDRESS	442 LANTERN BK ISLD DR			T ADDRESS		
CITY-ST-ZIP	SATELLITE BCH FL 32937		1.4 CITY-	ST - ZIP		
TITLE	D	DELETE	21 THLE			Change Add
NAME	BHALANI, KANHLAL H.		2.2 NAME			
STREET ADDRESS	\$975 PINETOP BLVD			T ADDRESS		
CITY-ST-ZIP TITLE	TITUSVILLE FL 32796 D	DELETE	2. 4 City - 3.1 Title	ST-ZIP		Change Add
NAME	GANDHI, PRATIBHA H		3.2 NAME			Change CJ Addi
STREET ADORESS	442 LANTER BK ISLD DR.			T ADDRESS		
CITY-ST-ZIP	<b>SATELLITE BCH. FL 32937</b>		3.4. CITY-	ST-ZIP		
TITLE	D	DELETE	4 1 THILE			☐ Change ☐ Addi
NAME	BHALAUI, GITA		4. 2 NAME			
STREET ADDRESS	3975 PINETOP BLVD. TITUSVILLE FL 32796		1	T ADDRESS		
CITY-ST-ZIP TITLE	THUSVILLE FL 32790	DELETE	4.4 C(TY - ) 5.1 T(TLE	SI-ZIP		Channe Addi
NAME			5.2 NAME			Change C Adda
STREET ADDRESS			6	T ADDRESS		
CITY-ST-ZIP			5.4 CHY-3			
TITLE		DELET <b>e</b>	61 TITLE			Change Addi
NAME			6.2 NAME			
STREET ADDRESS			ł	FADDRESS		
CITY-ST-ZIP 14. I hereby ce	ertify that the information supplied with	this filing does not qualify for	6.4 CiTy - 9	tion stated in	Section 119 07(3)(i) Florida Statutos I further o	ertify that the informati
indicated c	on this annual report of supplemental.	annual report is true and accuracy or trustee empowered to expent with an address.	itale and th	at my sionati.	rue shall have the same legal effect as if made un quired by Chapter 607, Florida Statutes; and that	ador agth: that I am an