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

PROFIT CORPORATION **ANNUAL REPORT**

1998



Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # J52501 (0)

BHANA CORPORATION

FILED May 11 1998 8:00am Secretary of State



Principal Place of Business 2015 S. ATLANTIC AVE DAYTONA BCH FL 32018 US		Mailing Address 2015 S. ATLANTIC AVE DAYTONA BCH FL 32018 US				4 1001115 0101 0101 11001 EIIN 80101	***** 31511 81911	A1811 51811 \$11	111 WIEN (WY)	
						DO NOT WRITE IN THIS SPACE				
										"
						01/20/1987				
	lace of Business	2a, Mailing Address			4, FEI Number	Applied For				
21		26				59-2773263	Not Applicable			
Suite, Apt.	#, etc.	Suite, Apt. #, etc.			5. Certificate of Status Desired			Additional	1	
22		27					Fee R	equired	_	
City & State	6	City & State			6. Election Campaign Financing	-	\$5.00 May Be Added to Fees			
Zio	Country	Zip Country			Trust Fund Contribution	<u> </u>			4	
24	25	29	30			8. This corporation owes or has a Personal Property Tax due Jun	_	_ ''''	itangible ∐ No	
27	g. Name and Address of Current		[30]	1		10. Name and Address of New I				+
BH	ANA, HARSADRAI			81	Name					1
2015 S. ATLANTIC AVE				<u> </u>	Ctropt And	troco /D O Dou Niverbas is Alat Free	oblol			4
	YTONA BEACH FL 32018	82 Street A			Street Add	ress (P.O. Box Number is Not Accept	enie)			
				83						1
				84	City			lacil 2:	Codo	4
					•		FL	11	Code	I
11, Pursuant	to the provisions of Sections 607.0502 egistered agent, or both, in the State m familiar with, and accept the obliga	and 607.1508, Florida Statu	tes, the a	bove	named corp	poration submits this statement for the	purpose of	changing i	ts registered	1
agent. La	m familiar with, and accept the obliga	tions of, Section 607.0505, Fl	autriorize Iorida Sta	a by tutes.	tne corpora	ation s board of directors. I hereby acc	ept the app	ointment as	registered	ļ
SIGNATURE										ı
12.	Signature, typed or printed name of registered agen OFFICERS AND			d Agen	t signatura requi	fred when reinstating)	DATE	DIDECTO	20.01.40	- 5
TITLE	20	DELETE	13.	TLE	·	ADDITIONS/CHANGES TO OFF	ICERS AND	Change	Addition	⊣გ
NAME	BUANA MADOADDALAI			1.2 NAME				L_1 Onlinge	radition	1
STREET ADDRESS 507 SOUTH ATLANTIC AVE.			1.3 STREET		nobecc					8
CITY-ST-ZIP	ORMOND BEACH FL	÷	1.4 CHY-		- 1					Š
TITLE	80	DELETE	2.1 TI			·		Change	☐ Addition	∣ե
NAME	BHANA, RANJANA		22 N	AME				*	_	
STREET ADDRESS	EAT COURT AT AND AND		4	23 STREET ADDRESS						
CITY-ST-ZIP	ORMOND BEACH FL		3	ITY-ST						
TITLE	VD	☐ DELETE	31 TI			· ·		Change	Addition	1
NAME	Bhana, Gitesh n.		3.2 N	AME				-		1
STREET ADDRESS	507 SOUTH ATLANTIC AVE.		3.3 \$1	TREET A	ODRESS					
CITY-ST-ZIP	ORMOND BEACH FL		3.4. C	ity-st	- ZiP					
TITLE	TD	DELETE	4.1 Ti					Change	Addition	1
NAME	BHANA, HARSADRAI		4. 2 N	AME						1
STREET ADDRESS	507 S ATLANTIC AVENUE		4.3 \$1	FREET A	DDRESS					
CITY-ST-ZIP	ORMOND BEACH FL		4.4 CI	TY-ST-	- ZIP					
TITLE		☐ DELETE	5,1 T I	TLE				Change	☐ Addition	7
NAME			5.2 NA	AME						
STREET ADDRESS			5.3 \$1	REET A	DDRESS					
CITY-ST-ZIP			5.4 CI	TY-ST-	- ZIP					
TITLE		DELETE	6.1 TI	TLE				☐ Change	Addition	1
NAME			6.2 N/	E	1					
STREET ADDRESS			6.3 ST	REET A	DORESS					
CITY-ST-ZIP		<i>^</i>	64.01	IY-SI.	. 71P					1

14. I 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 to an 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 expowered 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. 4/28/98