

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

PROFIT
CORPORATION
ANNUAL REPORT
1999



FLORIDA DEPARTMENT OF STATE
Katherine Harris
Secretary of State
DIVISION OF CORPORATIONS

FILED
Mar 09, 1999 8:00 am
Secretary of State

03-09-1999 90150 050 ***158.75

DOCUMENT # J52501 OK

1. Corporation Name

BHANA Corporation.

Principal Place of Business

Mailing Address

2015 SOUTH ATLANTIC AVE
DAYTONA
FL 32118

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

1/20/1987

4. FEI Number

592773263

Applied For

Not Applicable

5. Certificate of Status Desired

OR

\$8.75 Additional
Fee Required

6. Election Campaign Financing

□

\$5.00 May Be
Added to Fees

8. This corporation owes the current year Intangible
Personal Property Tax.

OR Yes

□ No

2. Principal Place of Business

2a. Mailing Address

21 Suite, Apt. #, etc.

26 Suite, Apt. #, etc.

22 City & State

27 City & State

23 Zip

Country

28 Zip

Country

24

25

29

30

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

HARSADRAI N. BHANA
507 SOUTH ATLANTIC AVE
ORMOND BEACH

81 Name GITESH N. BHANA

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

2015 SOUTH ATLANTIC AVE

83

DAYTONA

FL

85 Zip Code 32118

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, 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 607.0505, Florida Statutes.

SIGNATURE

Signature, typed or printed name of registered agent and file if applicable

(NOTE: Registered Agent signature required when reinstating)

3/3/99

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE PRESIDENT DIRECTOR X DELETE PD
NAME HARSHADRAI N. BHANA
STREET ADDRESS 507 SOUTH ATLANTIC AVE
CITY-ST-ZIP ORMOND BEACH

1.1 TITLE PRESIDENT DIRECTOR □ Change X Addition
1.2 NAME P.C. PATEL PD
1.3 STREET ADDRESS 1211 NORTH BELT HWY
1.4 CITY-ST-ZIP ST JOSEPH MO 64506

TITLE SECRETARY, DIRECTOR X DELETE SD
NAME KANTANA N. BHANA
STREET ADDRESS 507 SOUTH ATLANTIC AVE
CITY-ST-ZIP ORMOND BEACH

2.1 TITLE SECRETARY DIRECTOR □ Change X Addition
2.2 NAME ELABEN PATEL SD
2.3 STREET ADDRESS 1211 NORTH BELT HWY
2.4 CITY-ST-ZIP ST JOSEPH MO 64506

TITLE V.P. DIRECTOR □ DELETE VD
NAME GITESH N. BHANA
STREET ADDRESS 2015 SOUTH ATLANTIC AVE
CITY-ST-ZIP DAYTONA FL 32118

3.1 TITLE TREASURER DIRECTOR □ Change X Addition
3.2 NAME KAUSALYA BHANA T.D.
3.3 STREET ADDRESS 2015 SOUTH ATLANTIC AVE
3.4 CITY-ST-ZIP DAYTONA FL 32118

TITLE TREASURER DIRECTOR X DELETE TD
NAME HARSHADRAI N. BHANA
STREET ADDRESS 507 SOUTH ATLANTIC AVE
CITY-ST-ZIP ORMOND BEACH

4.1 TITLE VICE PRESIDENT CEO. X Change □ Addition
4.2 NAME GITESH N. BHANA V.CEO.
4.3 STREET ADDRESS 2015 SOUTH ATLANTIC AVE
4.4 CITY-ST-ZIP DAYTONA FL 32118

TITLE □ DELETE
NAME
STREET ADDRESS
CITY-ST-ZIP

5.1 TITLE □ Change □ Addition
5.2 NAME
5.3 STREET ADDRESS
5.4 CITY-ST-ZIP

TITLE □ DELETE
NAME
STREET ADDRESS
CITY-ST-ZIP

6.1 TITLE □ Change □ Addition
6.2 NAME
6.3 STREET ADDRESS
6.4 CITY-ST-ZIP

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 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 in an attachment with an address, with all other like empowered.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

GITESH N. BHANA

3/3/99

(904)2552446

Date

Daytime Phone #

CR2E034 (11/98)