

**FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00**

CORPORATION  
ANNUAL REPORT  
1995



FLORIDA DEPARTMENT OF STATE  
Sandra B. Morham  
Secretary of State  
DIVISION OF CORPORATIONS

**APPROVED  
AND  
FILED**

95 APR -7 AM 6:03

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

DOCUMENT # **J61034** (1)

1. Corporation Name  
**KAVITA, INC. OF FORT LAUDERDALE**

Principal Place of Business Mailing Address  
**5415 S.W. 116TH AVENUE  
COOPER CITY FL 33330**

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified **03/10/1987** 3a. Date of Last Report **02/25/1994**  
4. FEI Number **59-2779507** Applied For   
Not Applicable   
5. Certificate of Status Desired  **\$8.75 Additional Fee Required**  
6. Election Campaign Financing Trust Fund Contribution  **\$5.00 May Be Added to Fees**  
8. This corporation has liability for intangible tax under § 199.032, Florida Statutes  Yes  No

2. Principal Place of Business 2a. Mailing Address  
21 **12883 SPRING LAKE DR.** 26 **12883 SPRING LAKE DR.**  
Suite, Apt. #, etc. Suite, Apt. #, etc.  
22 \_\_\_\_\_ 27 \_\_\_\_\_  
City & State City & State  
23 **COOPER CITY, FL** 28 **COOPER CITY, FL**  
Zip Country Zip Country  
24 **33330** 25 **USA** 29 **33330** 30 **USA**

9. Name and Address of Current Registered Agent  
**GENTILE, JOHN D  
1601 NORTH PALM AVENUE  
SUITE 212  
PEMBROKE PINES FL 33026**

10. Name and Address of New Registered Agent  
81 Name \_\_\_\_\_  
82 Street Address (P.O. Box Number is Not Acceptable) \_\_\_\_\_  
83 \_\_\_\_\_  
84 City **FL** 85 Zip Code \_\_\_\_\_

11. Pursuant to the provisions of Sections 607.0503 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 this appointment as registered agent. I am familiar with and accept the obligations of Section 607.0505, Florida Statutes.

SIGNATURE \_\_\_\_\_

12. OFFICERS AND DIRECTORS

12.1	PTD GANDHI, KIRAN 5415 S.W. 116TH AVE. COOPER CITY FL 33330
12.2	VSD GANDHI, KETKI 5415 S.W. 116TH AVE. COOPER CITY FL 33330
12.3	
12.4	
12.5	
12.6	
12.7	
12.8	

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

13.1	1. TITLE <input type="checkbox"/> Change <input type="checkbox"/> Addition
13.2	2. NAME
13.3	3. STREET ADDRESS
13.4	4. CITY, ST, ZIP
13.5	5. TITLE <input type="checkbox"/> Change <input type="checkbox"/> Addition
13.6	6. NAME
13.7	7. STREET ADDRESS
13.8	8. CITY, ST, ZIP
13.9	9. TITLE <input type="checkbox"/> Change <input type="checkbox"/> Addition
13.10	10. NAME
13.11	11. STREET ADDRESS
13.12	12. CITY, ST, ZIP
13.13	13. TITLE <input type="checkbox"/> Change <input type="checkbox"/> Addition
13.14	14. NAME
13.15	15. STREET ADDRESS
13.16	16. CITY, ST, ZIP

14. I hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 199.032(3)(b), 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 that I am an authorized representative of the corporation or that I am duly empowered to execute this report as required by Chapter 607, Florida Statutes, and that my name appears in block 1, or block 1, if changed, or in an attachment with an address.

SIGNATURE: *Kiran R. Gandhi* **KIRAN R. GANDHI** 4/2/95 (305)436-6267  
SIGNATURE AND TYPED OR PRINTED NAME OF BOARD OFFICER OR DIRECTOR **PRESIDENT**