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

PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

	Secretary of State 1997 DIVISION OF CORPORATIONS		Secretary of State		
	MENT # KO70	90 (9)			
NISH CONSTRUCTION, INC.				A SERVICIOS DE MARIE ADOL DAMO INCLAS DA LA CALLA DA LA CALLA DA LA CALLA DA CALLA D	ANDER DEGEN GEREL ANDER ANDER THE
Principal Plac	e of Business	Mailing Address			
1725 W LAKE MARY BLVD 1725 W LAKE LAKE MARY FL 32746 LAKE MARY FL		1725 W LAKE MARY BLVD LAKE MARY FL 32746-3636			
US		US		, , , , , , , , , , , , , , , , , , ,	. Date of Last Report
	lace of Business	2a. Mailing Address		4, FEI Number	04/25/1996 Applied For
Sulte, Apt.	#, etc.	Suite, Apt. #, etc.		59-2860831 5. Certificate of Status Dosired	Not Applicable \$8.75 Additional
92		27			Fee Required
City & State	ө	City & State		6. Election Campaign Financing Trust Fund Contribution	\$5.00 May Be Added to Fees
Zip 24	Country 25	Z(p) 30	Country	8. This corporation has liability for intang	
Name and Address of Current Registered Agent 10, Name and Address of New Registered Agent					
PATEL, RASHMIKANT					
436 N. SUNDANCE DR. LAKE MARY FL 32746			82 Street	Address (P.O. Box Number is Not Acceptable)	
LAI.	L IRRITT L OZITO		83		
			84 City		85 Zip Code
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					
12.	Signature, typed or printed name of registere OFFICERS	ed agent and little if applicable. (NOTE Fir S AND DIRECTORS	egistored Agent signature	required when reinstating) DA' ADDITIONS/CHANGES TO OFFICERS	
TITLE	D	DELETE	1.1 TOLE	7	Change Addition
NAME	PATEL, RASMIKANT C.	•	1.2 NAME	PATEL RASHMIKANT C.	•
STREET ADDRESS	436 N. SUNDANCE DR		1.3 STREET ADDRESS	1725 W. UK-MARY BLUD	
CITY-ST-ZIP	LAKE MARY FL		1.4 CITY-ST-ZIP	LK-MARY , FL. 32746	
TITLE	D	DELETE	2.1 TITLE	D. PATEL KAVAVATI.IL.	Change Addition
NAME	PATEL, KALAVATI R.		2.2 NAME	1725 W. LK. MARY, BLUD	
STREET ADDRESS CITY-ST-ZIP	436 N. SUNDANCE DR LAKE MARY FL		2.3 STREET ADDRESS 2. 4 City-St-Zip	UC MART FL 32746	
TITLE	FULL MOUTE	DELETE	3.1 TITLE		Change Addition
NAME			3.2 NAME		Ţ
STREET ADDRESS			3.3 STREET ADDRESS		•
CITY-\$T-ZIP			3.4. CITY-ST-2IP		
TITLE		, DELETE	4.1 TH LE		Change Addition
NAME			4. 2 NAME		
STREET ADDRESS			4.3 STREET ADDRESS		
CITY-ST-ZIP TITLE		DELETE	4.4 CITY-ST-ZIP 5.1 TITLE		Change Addition
NAME		C) becut	5.2 NAME		The cualifier The Volume
STREET ADDRESS			5.3 STREET ADDRESS		
CITY-ST-ZIP			5.4 CITY-ST-ZIP		
TITLE		DELETE	61 TITLE		Change Addition
NAME			6.2 NAME		
STREET ADDRESS			6.3 STREET ADDRESS		

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 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 on an attachment with an address.

SIGNATURE:

PATEL

**PATEL*

FILED

Apr 21 1997 8:00am