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

PROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

## Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # K62161

(0)

Principal Place of Business  Mailing Address  1101 S. ROGERS CIRCLE STE. 15 BOCA RATON FL 33487 US  Mailing Address  1101 S. ROGERS CIRCLE STE. 25 BOCA RATON FL 33487-2749 US		3. Date Incorporated or Qualified 01/25/1989 03/29/1996			
2. Principal Place of Business	2a. Mailing Address	WE # 103	4. FEI Number	<del>  </del>	pplied For
Suite, Apt. #, etc.	26 67 GLEN # Suite, Apt. #, etc.	WE. # 103	65-0093590		ot Applicable Additional
22	27 OAKLANI	CA	5. Certificate of Status Desired	7	equired
City & State	City & State	,	6. Election Campaign Financing	\$5.00	May Be
23	28 94611		Trust Fund Contribution		lo Fees
Ziρ Country	Zip	Country	8. This corporation has liability for		. 199.032,
24 25 9, Name and Address of Curre	29	30	Florida Statutes  10. Name and Address of New R	Yes No	
MALANI, BHARATI	ent negletelen Wäglit	81 Name	14. Maine and Audiess Of Mell U	ARISTOIAN WANIT	
#711 BOCA RATON FL FL 33433  11. Pursuant to the provisions of Sections 607.05 office or registered agent, or both, in the Stalagent. I am familiar with, and accept the obli	502 and 607 1508, Florida Stat ite of Florida, Such change wa igations of, Section 607 0505, I	83 84 City	poration submits this statement for the tition's board of directors. I hereby acceptance	FL 85 Zip	Code ts registered registered
SIGNATURE					
SIGNATURE Signature, typing or printed name of rogistered a	agent and little in applicable. (N	OTE: Registered Agent signature requi	ired when reinstating)	DATE	
SIGNATURE Signature typing or printed name of registered at 12. OFFICERS A	agent and little if applicable. (NIND DIRECTORS	OTE: Registered Agent signature requi		DATE	
SIGNATURE Signature typing or printed name of registered at 12. OFFICERS A TITLE PD	agent and little in applicable. (N	OTE: Registered Agent signature requi	ired when reinstating)	DATE FICERS AND DIRECTOR	RS IN 12
SIGNATURE Signature typing or printed rank of registrated at 12. OFFICERS A IIILE PD	agent and little if applicable. (NIND DIRECTORS	DTE: Registered Agent signature requi	ired when reinstating)	DATE FICERS AND DIRECTOR	RS IN 12
SIGNATURE Signature tigues or printed name of registered in  12. OFFICERS A  III.E PD  MALANI, BHARATI	agent and little if applicable. (NIND DIRECTORS	DTE: Registered Agent signature required 13.  11 TITLE  12 NAME	ired when reinstating)	DATE FICERS AND DIRECTOR	RS IN 12
SIGNATURE Signature tiguing or printed remot of requestion at a first street and a first street street and a first street and a first street and a first street stree	agent and little if applicable. (NIND DIRECTORS	TE: Registered Agent signature required.  13.  11 TITLE  12 NAME  1.3 STREET ADDRESS	ired when reinstating)	DATE FICERS AND DIRECTOR	RS IN 12
SIGNATURE  12. OFFICERS A  TITLE PD  NAME MALANI, BHARATI  STREET ADDRESS CITY-ST-ZIP BOCA RATON FL	agent and title if applicable. (N ND DIRECTORS DELETE	TE: Registered Agent signature required.  13.  11 TITLE  12 NAME  1.3 STREET ADDRESS  1.4 CITY-ST-ZIP	ired when reinstating)	DATE ICERS AND DIRECTOR Change	RS IN 12
SIGNATURE  Sugnature in president annual requirement and requirement at the posterior of the property of the p	agent and title if applicable. (N ND DIRECTORS DELETE	TE. Registered Agent signature required.  13.  11 TITLE 12 NAME 1.3 STREET ADDRESS 1.4 CITY-ST-ZIP 2.1 TITLE 2.2 NAME 2.3 STREET ADDRESS	ired when reinstating)	DATE ICERS AND DIRECTOR Change	RS IN 12
SIGNATURE Sugnature in presentation of requiremental and consequence of the posterior of the properties of the propertie	agent and tide in applicable. (NO DIRECTORS DELETE	TE. Registered Agent signature required.  13.  11 TITLE 12 NAME 1.3 STREET ADDRESS 1.4 CITY-ST-ZIP 2.1 TITLE 2.2 NAME 2.3 STREET ADDRESS 2.4 CITY-ST-ZIP	ired when reinstating)	DATE  ICERS AND DIRECTO  Change  Change	RS IN 12 Addilion Addition
SIGNATURE Signature typical or procedulance of registered in  12. OFFICERS A  TITLE PD MALANI, BHARATI STREET ADDRESS CITY-ST-ZIP BOCA RATON FL  TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE	agent and title if applicable. (N ND DIRECTORS DELETE	TE Registered Agent signature required to the signature required to th	ired when reinstating)	DATE ICERS AND DIRECTOR Change	RS IN 12 Addilion Addition
SIGNATURE Signature typing or private rannic of registered in  12. OFFICERS A  TITLE PD MALANI, BHARATI STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME NAME NAME	agent and tide in applicable. (NO DIRECTORS DELETE	13.  11 TITLE 12 NAME 1.3 STREET ADDRESS 1.4 CITY-ST-ZIP 2.1 TITLE 2.2 NAME 2.3 STREET ADDRESS 2.4 CITY-ST-ZIP 3.1 TITLE 3.2 NAME	ired when reinstating)	DATE  ICERS AND DIRECTO  Change  Change	RS IN 12 Addilion Addition
SIGNATURE  Signature typing or printed remot of registered in  12. OFFICERS A  TITLE PD MALANI, BHARATI  6682 BOCA DEL MAR DR  BOCA RATON FL  TITLE  NAME  STREET ADDRESS  CITY-ST-ZIP  TITLE  NAME  STREET ADDRESS  STREET ADDRESS  STREET ADDRESS  STREET ADDRESS  STREET ADDRESS	agent and tide in applicable. (NO DIRECTORS DELETE	13. 11 TITLE 12 NAME 1.3 STREET ADDRESS 1.4 CITY-ST-ZIP 21 TITLE 22 NAME 2.3 STREET ADDRESS 2.4 CITY-ST-ZIP 31 TITLE 32 NAME 3.3 STREET ADDRESS	ired when reinstating)	DATE  ICERS AND DIRECTO  Change  Change	RS IN 12 Addilion Addition
SIGNATURE Signature typing or private ranne of registered in  12. OFFICERS A  TITLE PD MALANI, BHARATI STREET ADDRESS CITY-ST-ZIP BOCA RATON FL  TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP CITY-ST-ZIP CITY-ST-ZIP CITY-ST-ZIP CITY-ST-ZIP	agent and tide in applicable. (NO DIRECTORS DELETE	13.  11 TITLE 12 NAME 1.3 STREET ADDRESS 1.4 CITY-ST-ZIP 2.1 TITLE 2.2 NAME 2.3 STREET ADDRESS 2.4 CITY-ST-ZIP 3.1 TITLE 3.2 NAME	ired when reinstating)	DATE  ICERS AND DIRECTO  Change  Change	Addition  Addition
SIGNATURE  Signature typing or printed remot of registered in  12. OFFICERS A  TITLE PD MALANI, BHARATI  6682 BOCA DEL MAR DR  BOCA RATON FL  TITLE  NAME  STREET ADDRESS  CITY-ST-ZIP  TITLE  NAME  STREET ADDRESS  STREET ADDRESS  STREET ADDRESS  STREET ADDRESS  STREET ADDRESS	agest and lide if applicable. (NIND DIRECTORS DELETE  DELETE  DELETE	13.  11 TITLE 12 NAME 1.3 STREET ADDRESS 1.4 CITY-ST-ZIP 21 TITLE 22 NAME 2.3 STREET ADDRESS 2.4 CITY-ST-ZIP 31 TITLE 32 NAME 3.3 STREET ADDRESS 3.4 CITY-ST-ZIP	ired when reinstating)	DATE  Change  Change	Addition  Addition
SIGNATURE Signature typing or printed remot of registered in  12. OFFICERS A  TITLE PD MALANI, BHARATI STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE TITLE NAME TITLE	agest and lide if applicable. (NIND DIRECTORS DELETE  DELETE  DELETE	13. 11 TITLE 12 NAME 1.3 STREET ADDRESS 1.4 CITY-ST-ZIP 21 TITLE 22 NAME 2.3 STREET ADDRESS 2.4 CITY-ST-ZIP 31 TITLE 32 NAME 3.3 STREET ADDRESS 3.4 CITY-ST-ZIP 4.1 TITLE	ired when reinstating)	DATE  Change  Change	Addition  Addition
SIGNATURE Signature typing or printed remic of rogistered in  12. OFFICERS A TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS STREET ADDRESS STREET ADDRESS STREET ADDRESS STREET ADDRESS STREET ADDRESS	agest and lide if applicable. (NIND DIRECTORS DELETE  DELETE  DELETE	13. 11 TITLE 12 NAME 1.3 STREET ADDRESS 1.4 CITY-ST-ZIP 21 TITLE 22 NAME 2.3 STREET ADDRESS 2.4 CITY-ST-ZIP 31 TITLE 32 NAME 3.3 STREET ADDRESS 3.4 CITY-ST-ZIP 4.1 TITLE 4.2 NAME	ired when reinstating)	DATE  Change  Change	Addition  Addition
SIGNATURE Signature typing or printed remoted remoted registered in Malani, Bharati Barati Address City-st-zip Title NAME Street Address City-st-zip	agest and lide if applicable. (NIND DIRECTORS DELETE  DELETE  DELETE	13. 11 TITLE 12 NAME 1.3 STREET ADDRESS 1.4 CITY-ST-ZIP 2.1 TITLE 2.2 NAME 2.3 STREET ADDRESS 2.4 CITY-ST-ZIP 3.1 TITLE 3.2 NAME 3.3 STREET ADDRESS 3.4 CITY-ST-ZIP 4.1 TITLE 4.2 NAME 4.3 STREET ADDRESS	ired when reinstating)	DATE  Change  Change	Addition  Addition
SIGNATURE Signature typing or printed remaind of registered in MALANI, BHARATI  MALANI, BHARATI  6662 BOCA DEL MAR DR  BOCA RATON FL  TITLE  NAME STREET ADDRESS CITY-ST-ZIP TITLE	agent and lide in applicable. (NIND DIRECTORS DELETE  DELETE  DELETE  DELETE	13. 11 TITLE 12 NAME 1.3 STREET ADDRESS 1.4 CITY-ST-ZIP 21 TITLE 22 NAME 23 STREET ADDRESS 2.4 CITY-ST-ZIP 31 TITLE 32 NAME 3.3 STREET ADDRESS 3.4 CITY-ST-ZIP 4.1 TITLE 4.2 NAME 4.3 STREET ADDRESS 4.4 CITY-ST-ZIP	ired when reinstating)	DATE FICERS AND DIRECTOI Change Change Change	Addition  Addition
SIGNATURE Signature typical or protect same of registered in  12. OFFICERS A  III.E PD MALANI, BHARATI  6662 BOCA DEL MAR DR  6717-SI-ZIP BOCA RATON FL  TITLE NAME  STREET ADDRESS  GITY-SI-ZIP  TITLE NAME  STREET ADDRESS  CITY-SI-ZIP  TITLE NAME	agent and lide in applicable. (NIND DIRECTORS DELETE  DELETE  DELETE  DELETE	13. 11 TITLE 12 NAME 1.3 STREET ADDRESS 1.4 CITY-ST-ZIP 2.1 TITLE 2.2 NAME 2.3 STREET ADDRESS 2.4 CITY-ST-ZIP 3.1 TITLE 3.2 NAME 3.3 STREET ADDRESS 3.4 CITY-ST-ZIP 4.1 TITLE 4.2 NAME 4.3 STREET ADDRESS 4.4 CITY-ST-ZIP 5.1 TITLE	ired when reinstating)	DATE FICERS AND DIRECTOI Change Change Change	RS IN 12 Addition Addition
SIGNATURE Superflower typing on proceed names of registered in  12. OFFICERS A  TITLE PD MALANI, BHARATI STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP	Agent and title in applicable. (NIND DIRECTORS DELETE  DELETE  DELETE  DELETE	13.  11 TITLE 12 NAME 1.3 STREET ADDRESS 1.4 CITY-ST-ZIP 2.1 TITLE 2.2 NAME 2.3 STREET ADDRESS 2.4 CITY-ST-ZIP 3.1 TITLE 3.2 NAME 3.3 STREET ADDRESS 3.4 CITY-ST-ZIP 4.1 TITLE 4.2 NAME 4.3 STREET ADDRESS 4.4 CITY-ST-ZIP 5.1 TITLE 5.2 NAME 5.3 STREET ADDRESS 5.4 CITY-ST-ZIP 5.1 TITLE 5.2 NAME 5.3 STREET ADDRESS 5.4 CITY-ST-ZIP 5.5 TITLE 5.5 NAME 5.5 STREET ADDRESS 5.5 CITY-ST-ZIP	ired when reinstating)	DATE FICERS AND DIRECTOI Change Change Change Change	Addition  Addition  Addition  Addition
SIGNATURE  Signature typing or private disence of registered in the property of the private disence of registered in the property of the private disence of registered in the private disence of reg	agent and lide in applicable. (NIND DIRECTORS DELETE  DELETE  DELETE  DELETE	13.  11 TITLE 12 NAME 1.3 STREET ADDRESS 1.4 CITY-ST-ZIP 2.1 TITLE 2.2 NAME 2.3 STREET ADDRESS 2.4 CITY-ST-ZIP 3.1 TITLE 3.2 NAME 3.3 STREET ADDRESS 3.4 CITY-ST-ZIP 4.1 TITLE 4.2 NAME 4.3 STREET ADDRESS 3.4 CITY-ST-ZIP 5.1 TITLE 5.2 NAME 5.3 STREET ADDRESS 5.4 CITY-ST-ZIP 5.1 TITLE 5.2 NAME 5.3 STREET ADDRESS 5.4 CITY-ST-ZIP 5.1 TITLE 5.2 NAME 5.3 STREET ADDRESS 5.4 CITY-ST-ZIP 5.1 TITLE 5.2 NAME 5.3 STREET ADDRESS 5.4 CITY-ST-ZIP 5.1 TITLE 5.2 NAME 5.3 STREET ADDRESS 5.4 CITY-ST-ZIP 6.1 TITLE	ired when reinstating)	DATE FICERS AND DIRECTOI Change Change Change	Addition  Addition  Addition  Addition
SIGNATURE Signature typing or protect remain of registered in  12. OFFICERS A  TILE NAME STREET ADDRESS CITY-ST-ZIP TIFLE NAME	Agent and title in applicable. (NIND DIRECTORS DELETE  DELETE  DELETE  DELETE	13.  11 TITLE 12 NAME 1.3 STREET ADDRESS 1.4 CITY-ST-ZIP 21 TITLE 22 NAME 2.3 STREET ADDRESS 2.4 CITY-ST-ZIP 31 TITLE 32 NAME 3.3 STREET ADDRESS 3.4 CITY-ST-ZIP 4.1 TITLE 4.2 NAME 4.3 STREET ADDRESS 4.4 CITY-ST-ZIP 5.1 TITLE 5.2 NAME 5.3 STREET ADDRESS 5.4 CITY-ST-ZIP 5.1 TITLE 5.2 NAME 5.3 STREET ADDRESS 6.1 TITLE 5.3 NAME 5.4 CITY-ST-ZIP 5.1 TITLE 5.5 NAME 5.5 STREET ADDRESS 5.6 CITY-ST-ZIP 6.1 TITLE 6.2 NAME	ired when reinstating)	DATE FICERS AND DIRECTOI Change Change Change Change	Addition  Addition  Addition  Addition
SIGNATURE  Signature typing or private disence of registered in the property of the private disence of registered in the property of the private disence of registered in the private disence of reg	Agent and title in applicable. (NIND DIRECTORS DELETE  DELETE  DELETE  DELETE	13.  11 TITLE 12 NAME 1.3 STREET ADDRESS 1.4 CITY-ST-ZIP 2.1 TITLE 2.2 NAME 2.3 STREET ADDRESS 2.4 CITY-ST-ZIP 3.1 TITLE 3.2 NAME 3.3 STREET ADDRESS 3.4 CITY-ST-ZIP 4.1 TITLE 4.2 NAME 4.3 STREET ADDRESS 3.4 CITY-ST-ZIP 5.1 TITLE 5.2 NAME 5.3 STREET ADDRESS 5.4 CITY-ST-ZIP 5.1 TITLE 5.2 NAME 5.3 STREET ADDRESS 5.4 CITY-ST-ZIP 5.1 TITLE 5.2 NAME 5.3 STREET ADDRESS 5.4 CITY-ST-ZIP 5.1 TITLE 5.2 NAME 5.3 STREET ADDRESS 5.4 CITY-ST-ZIP 5.1 TITLE 5.2 NAME 5.3 STREET ADDRESS 5.4 CITY-ST-ZIP 6.1 TITLE	ired when reinstating)	DATE FICERS AND DIRECTOI Change Change Change Change	Addition  Addition

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTO

BHARATI MALANI

1/22/97

**FILED** 

Jan 29 1997 8:00am

Secretary of State

Daytime Phone \*