SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER SEPTEMBER 30, 1998. AMOUNT DUE ON OR BEFORE 09/30/98: \$550 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$750).

PROFIT CORPORATION ANNUAL REPORT

1998

FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT #
1. Corporation Name SHREE-VISHNU, INC.

(6)

FILED Aug 05 1998 8:00am Secretary of State



							······································			<u> </u>
Principal Place of Business Mailing Address								elyji Vil	HE WINDS WINDS WINES 1886	
3501 BROADWAY 3501 BROADWAY										
RIVIERA BEACH FL 33404			riviera i	RIVIERA BEACH FL 33404				DO NOT WRITE IN THIS SP ACE		
								3. Date Incorporated or Qualified	GOFA	<u> </u>
!								07/27/1989		ŀ
2. Principal P	lace of Business	2a. Maili	2a. Mailing Address				4. FEI Number	_	Applied For	
21		26	26				65-0136105		Not Applicable	
Suite, Apt.	#, etc.	Suite	Suite, Apt. #, etc.				5. Certificate of Status Desired	\$8	3.75 Additional	
22		27					3. Certificate of Otalus Desired		Fee Required	
City & State			h	City & State				6. Election Campaign Financing \$5.00 May Be		
Zip Country				Zip Country				Trust Fund Contribution Added to Fees		
24	25		1 -1	29 Coun				8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. Yes No		
		Address of Curre		Agent	30	T		10. Name and Address of New Registered		
MAN	IDELL, CRAIG J		¥.iiiiiiiii	-		81	Name			
800 CORPORATE DR, SUITE 510						82 Street Address (P.O. Box Number is Not Acceptable)				
FORT LAUDERDALE FL 33334						02	SIFEELAGE	Street Address (P.O. Box Number is Not Acceptable)		
***						83				
						84	City		85	Zip Code
							•	Fi	-]	·
office or	t to the provisions registered agent, r am familiar with, a	or both, in the Stat	e of Florida. Su	ich change was a	uthorizei	d by	the corpora	poration submits this statement for the purpose of cation's board of directors. I hereby accept the appo	hangin intmen	g its registered it as registered
SIGNATURE	(C.)	no docopi ino obis	gations of, sooi	1011 001 .0000, 1 10	nou olu	iuics	•			
	Signature, typed or print	ed name of registered ag			TE Registe	red A	gent signalure re	equired when reinstaling) DATE		
12.		OFFICERS A	ND DIRECTOR		13.			ADDITIONS/CHANGES TO OFFICERS A	ND DI	RECTORS IN 12
TITLE	D D	011.0		L_J DELETE	1.1 1				L_ c	hange Addition
NAME	PATEL, RAME: 3501 BROADY				1.2 NA					
STREET ADDRESS	RIVEIRA BEAC						ADDRESS			
CITY-ST-ZIP TITLE	D	III I L		DELETE	2.1 Til	TY-ST-	-219		По	
NAME	PATEL, PUSHI	PA R.			2.2 NA				L_ 0	hange Addition
STREET ADDRESS	3501 BROADY						ADDRESS			Ī
CITY-ST-ZIP	RIVEIRA BEAC				2.4 CI					
TITLE				DELETE	3.1 T(1				C	hange Addition
NAME					3.2 NA	ME	}			
STREET ADDRESS					3.3 ST	REET	ADDRESS			1
CITY-ST-ZIP					3.4 CI		-ZIP			
TITLE				[]] DELETE	4.1 111				CI	nange Addition
NAME					4.2 NA					
STREET ADDRESS							ADDRESS			
CITY-ST-ZIP		.=			4.4 CF		ZIP			
TITLE NAME				L] DELETE	5.1 TIT				LJ CI	hange L Addition
STREET ADDRESS					5.2 NA		AUUDESS			
CITY-ST-ZIP					5.4 CI		ADDRESS			
TITLE				DELETE	6.1 T/T		2.0-			nange Addition
NAME				[_] DECETE	6.2 NA				L. U	isiiAo F""] Vadillou
STREET ADDRESS							ADDRESS			
0.774.07.740					2.4.01					•

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 on an attachment with an address.