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

**FILED** Apr 02 1998 8:00am **PROFIT** FLORIDA DEPARTMENT OF STATE CORPORATION Sandra B. Mortham ANNUAL REPORT Secretary of State Secretary of State DIVISION OF CORPORATIONS 1998 DOCUMENT # 1. Corporation Name (0) GANDHI BROTHERS, INC. Principal Place of Business Mailing Address 1203 HYPOLUXO ROAD 1203 HYPOLUXO ROAD LANTANA FL 33462 LANTANA FL 33462 DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified 06/12/1990 2a. Mailing Address 2. Principal Place of Business 4. FEI Number Applied For Not Applicable 65-0204773 Suite, Apt. #, etc. Suite, Apt. #, etc. \$8.75 Additional 5. Certificate of Status Desired Fee Required 22 27 City & State City & State 6. Election Campaign Financing \$5.00 May Be Trust Fund Contribution Added to Fees 23 28 Zip Country Country Zip 8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. Yes 30 24 25 29 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent 81 Name PATEL, NIRANJANKUMAR V. 1203 HYPOLLSXO 82 Street Address (P.O. Box Number is Not Acceptable) LANTANA FL 33462 83 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 Signature, typed or printed name of registered agent and title if applicable (NOTE Registered Agent's gnature required when reinstating) ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 12. OFFICERS AND DIRECTORS 13. Change Addition \_\_ DELETE TITLE DP 1.1 TITLE NAME PATEL, NIRANJANKUMAR V. 1.2 NAME 1203 HYPOLUXO ROAD STREET ADDRESS 1.3 STREET ADDRESS LANTANA FL CITY-ST-ZIF 1.4 CITY - ST - ZIP DELETE Change Addition 2.1 TITLE TITLE DVP SHARMISTA, PATEL N. 2.2 NAME 1203 HYPOLUXO ROAD 2.3 STREET ADDRESS STREET ADDRESS LANTANA FL 2. 4 CiTY - ST - ZiP CITY-ST-2IP DELETE 3.1 1ITLE Change ☐ Addition TITLE 3.2 NAME NAME 3.3 STREET ADDRESS STREET ADDRESS 3.4. CITY-ST-ZIP CITY-ST-ZIF DELETE Change Addition TITLE 4.1 TITLE NAME 4. 2 NAME STREET ADDRESS 4.3 STREET ADDRESS CITY-ST-ZIP 4.4 CITY-ST-ZIP DELETE Change Addition 5.1 TITLE TITLE 5.2 NAME NAME 5.3 STREET ADDRESS STREET ADDRESS 5.4 CITY-ST-ZIP CITY-ST-ZIP Change Addition DELETE 61 TITLE TITLE 6.2 NAME NAME 6.3 STREET ADDRESS STREET ADDRESS 6.4 CITY-ST-ZIP CITY-ST-ZIP 14. Thereby 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 arm an officer or director of the corporation of the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name that are also as if Block 12 or Block 13 if changet, or in an attaching with an address.