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PROFIT CORPORATION ANNUAL REPORT

1997

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SIGNATURE:

14. For hereby certify that the information sylinformation indicated on this annual repular an an officer or director of the corporal

appears in Block 12 or Block 13 if cl



FLORIDA DEPARTMENT OF STATE

FILED

Apr 08 1997 8:00am

Secretary of State

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # M22404

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WATKINS, G. DESAI, INTERNATIONAL, INC.

Principal Place of Business Mailing Address 6923 ATLANTIC BLVD. 6923 ATLANTIC BLVD. JACKSONVILLE FL 32211-8703 JACKSONVILLE FL 32211-8703 3. Date Incorporated or Qualified 3a. Date of Last Report 10/24/1985 04/04/1996 2a. Mailing Address 4. FEI Number Applied For 2. Principal Place of Business 59-2600440 Not Applicable 26 Suite, Apt. #, etc. \$8.75 Additional Suite Apt # etc 5. Certificate of Status Desired Fee Required 27 22 City & State City & State 6. Election Campaign Financing \$5.00 May Be Trust Fund Contribution Added to Fees 28 23 Country 8. This corporation has liability for intangible tax under s. 199.032, Country Yes No Florida Statutes 30 24 25 29 10. Name and Address of New Registered Agent 9. Name and Address of Current Registered Agent 81 Name PAUL, HERMAN S 2468 ATLANTIC BLVD. Street Address (P.O. Box Number is Not Acceptable) JACKSONVILLE FL 32207 83 84 City Zip Code 85 Pursuant to the provisions of Sections 607/050 office or registered agent, or both, in the State agent. Lam faint providing and accept the obliga-2 and 607, 1508. Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered state of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered bligations of Section 607.0505, Florida Statutes. SIGNATURE act about and the if applicable (NOTE: Registered Agent signature required when reinstating) ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 (96/6) 12. OFFICERS AND DIRECTORS 13. DELETE Change 1.1 TITLE TIFLE DESAL PRAKASH D. 1.2 NAME NAME 6923 ATLANTIC BLVD. 1.3 STREET ADDRESS STREET ADORESS JACKSONVILLE FL 1.4 CITY-ST-ZIP 011 y - \$1 - 20° Change Addition VD DELETE 2.1 TITLE UILE SHAH. MAHESH 2.2 NAME NALIE 702 HAWSBILL ISLAND DR 2.3 STREET ADDRESS STREET ADDRESS SATELLITE BCH FL 2. 4 CITY - ST - ZIP CHY-ST-ZP Addition DELETE Change 31 TITLE TILE SHAH, RASHMI 3.2 NAME 702 HAWSBILL ISLAND DR 3.3 STREET ADDRESS STREET ADDRESS SATELLITE BCH FL 3.4. CITY - ST - ZIP $CP(Y \cdot ST \cdot Z)^{p}$ Change Addition DELETE 4.3 TITLE DICE NAME 4. 2 NAME 4.3 STREET ADDRESS STREET ADDRESS 4.4 CITY - ST - ZIP City - St - ZiP Change Addition DELETE 5.1 TITLE THEF NAME 5.2 NAME 5.3 STREET ADDRESS STREET ADDRESS 5.4 CITY-ST-ZIP CHY SE ZIP DELETE ☐ Change Addition 6 1 TITLE THEF NAME 6.2 NAME STREET ADDRESS. **6.3 STREET ADDRESS**

6.4 CITY-ST-ZIP

with an

d with this filing does not qualify for the exemption stated in Section 119.07(3)(i). Florida Statutes, I further certify that the supplemental annual report is true and accurate and that my signature shall have the same legal effect as if made under oath, that or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name