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Apr 14, 1999 8:00 am  
Secretary of State

04-14-1999 90165 011 \*\*\*600.00

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PROFIT  
CORPORATION  
ANNUAL REPORT  
1999



FLORIDA DEPARTMENT OF STATE  
Katherine Harris  
Secretary of State  
DIVISION OF CORPORATIONS

DOCUMENT # M28576

1. Corporation Name

RANI INTERNATIONAL, INC.

Principal Place of Business

7041 GRAND NATIONAL DR.  
SUITE 132  
ORLANDO FL 32819  
US

Mailing Address

7041 GRAND NATIONAL DR.  
SUITE 132  
ORLANDO FL 32819  
US

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

03/07/1986

4. FEI Number

59-2672448

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional  
Fee Required

6. Election Campaign Financing  
Trust Fund Contribution ☐

\$5.00 May Be  
Added to Fees

8. This corporation owes the current year Intangible  
Personal Property Tax. ☐ Yes ☐ No

2. Principal Place of Business

21 Suite, Apt. #, etc.

22 City & State

23 Zip

Country

24

25

2a. Mailing Address

26 Suite, Apt. #, etc.

27 City & State

28 Zip

Country

30

9. Name and Address of Current Registered Agent

MOTOLAW, INC  
C/O MILAM, OTERO, LARSEN, ET AL  
1301 RIVERPLACE BLVD., STE. 1301  
JACKSONVILLE FL 32207

10. Name and Address of New Registered Agent

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)

83 413 VIRGINIA DRIVE

84 City ORLANDO

FL

85 Zip Code 32803

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]*

(NOTE: Registered Agent signature required when reinstating)

DATE

15 Mar 99

12. OFFICERS AND DIRECTORS

TITLE DP ☐ DELETE

NAME AUJAN, ADEL  
STREET ADDRESS P.O. BOX 990, NA  
CITY-ST-ZIP DAMMAM, SAUDI ARABIA

TITLE VT ☐ DELETE

NAME STANISLAW, ROBERT A.  
STREET ADDRESS 7041 GRAND NATIONAL DR., STE. 132  
CITY-ST-ZIP ORLANDO FL

TITLE S ☐ DELETE

NAME WEBSTER, DAVID  
STREET ADDRESS 1301 RIVERPLACE BLVD  
CITY-ST-ZIP JACKSONVILLE FL 32207

TITLE ☐ DELETE

NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ DELETE

NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ DELETE

NAME  
STREET ADDRESS  
CITY-ST-ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE ☒ Change ☐ Addition

1.2 NAME  
1.3 STREET ADDRESS 7041 GRAND NATIONAL DR, SUITE 132  
1.4 CITY-ST-ZIP ORLANDO, FL 32819

2.1 TITLE ☐ Change ☐ Addition

2.2 NAME  
2.3 STREET ADDRESS  
2.4 CITY-ST-ZIP

3.1 TITLE ☒ Change ☐ Addition

3.2 NAME  
3.3 STREET ADDRESS 413 VIRGINIA DRIVE  
3.4 CITY-ST-ZIP ORLANDO, FL 32803

4.1 TITLE ☐ Change ☐ Addition

4.2 NAME  
4.3 STREET ADDRESS  
4.4 CITY-ST-ZIP

5.1 TITLE ☐ Change ☐ Addition

5.2 NAME  
5.3 STREET ADDRESS  
5.4 CITY-ST-ZIP

6.1 TITLE ☐ Change ☐ Addition

6.2 NAME  
6.3 STREET ADDRESS  
6.4 CITY-ST-ZIP

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, with all other like empowered.

SIGNATURE:

*[Signature]*  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

ROBERT A. STANISLAW

Date

Daytime Phone #

407-352-3660

CR2E034 (11/98)