SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER SEPTEMBER 17, 1997. AMOUNT DUE ON OR BEFORE 9/17/97: \$550 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$750.)

PROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # M51747

(7)

FILED
Jul 22 1997 8:00am
Secretary of State

	MARKET OF BRO	WARD, INC. Mailing Addre 400 N.W. 21ST WILTON MANK	CT,						
	ALE FL 33311	FT LAUDERDA				DO NOT WRIT	E IN THIS SPA	CE	
						3. Date Incorporated or Qualified	3a. Date o	f Last R	eport
						05/07/1987	06/18		
	Place of Business	<u>├</u> ─¬ ~	2a. Mailing Address			4. FEI Number			oplied For
Suite, Apt	1 # 010	26 Cuite Ant	Suite, Apt. #, etc.			59-2846855	Not Applicable		
22	ι, π, οιυ.	 	27			5. Certificate of Status Desired See Required Fee Required			
City & Sta	ate	City & State				6. Election Campaign Financing			 -
23		<u> </u>	28			6. Election Campaign Financing \$5.00 May Be Trust Fund Contribution Added to Fees			
Zip	Country				·	8. This corporation owes or has p	aid the current		
24	25		29 30			Personal Property Tax due June 30. Yes No			
	9, Name and Addre	ss of Current Registered Agen				10. Name and Address of New R	egistered Age	nt	
	ntel, dineshbhai			81	Name				
	0 N.W. 21 CT			82	Street Ad	Idress (P.O. Box Number is Not Accepta	ble)		
	LTON MANORS			-					
FT	LAUDERDALE FL 333	11		83					
				84	Cily	· · · · · · · · · · · · · · · · · · ·	8	5 Zip (Code
						prporation submits this statement for the	FL °		
agent. I	am familiar with, and acco	ept the obligations of, Section 60	7.0505, Florida	Statutes	S.	ration's board of directors. I hereby acco		nom as	
12.		of registered agent and title if applicable FFICERS AND DIRECTORS	(NOTE: HR	13.	eni signature rec	quired when roinstating) ADDITIONS/CHANGES TO OFFI	DATE CERS AND DI	RECTOR	IS IN 12
TITLE	T D		DELETE	1.1 HTLE				Change	Addition
NAME	PATEL, DINESHBH.	Al	l	1.2 NAME					
STREET ADDRESS	400 NW 21 CT		1	1.3 STREET	ADDRESS				
CITY-ST-ZIP	FT. LAUDERDALE I	FL		1.4 CITY-S	I - ZIP				
TITLE			DELETE	21 THILE				Change	Addition
NAME				22 NAME					
STREET ADDRESS	1		- 1	2.3 STREET	ADDRESS				j
CITY-ST-ZIP				2. 4 CHY-5	ST-ZIP				
TiTL€			DELETE	3.1 TITLE	İ			Change	Addition Addition
NAME			1	3.2 NAME)				
STREET ADDRESS			ļ	3.3 STREE 1	ADDRESS				
CITY-ST-ZIP	ļ		DELETE	3.4 CITY-5	ST - ZIP				T
TITLE		U	DELETE	4.1 TITLE	ł			Change	Addition
NAME				4.2 NAME					
STREET ADDRESS			4	4 3 STREET					- 1
CITY-ST-ZIP			DELETE.	4.4 CITY - S	1-ZIP			Charas	Addition
TITLE		U		5.1 TITLE	Į		ليا	Change	MODITION
NAME				5.2 NAME					
STREET ADORESS	1			5.3 STREET					
CITY-ST-ZIP			DELETE	5.4 CITY - S	1-ZIP			Change	Addition
TITLE				6.1 TOLE	ĺ		Ц	onange	חטטווטות נייין
NAME OTOSCI ADODESO	1		Į.	6.2 NAME	1000000				
STREET ADDRESS				6.3 STREET					
CHY. NI. 742	1			IN ALCHIY-S	1.28				

14. 1 do 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.

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2) 02 am

7-12 ar