## SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER SEPTEMBER 17, 1997 AMOUNT DUE ON OR BEFORE 9/17/97; \$61.26 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$236.25).

NONPROFIT **CORPORATION** ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

## Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

## FILED Sep 18 1997 8:00am Secretary of State

DOCUI	MENT # N17322	2 (1)		
	ASSOCIATION OF GREATER	DAYTONA BEACH, IN	c.	
Principal Place of Business		Mailing Address		T TREITING BOY HOUR INDEED BUILD THOSE HERE BUILD HOUR STORE BURNESS DIRECTOR AND IN BURNESS DIRECTOR
5 OUEEN ANNE		5 QUEEN ANNE CT.		
ORMOND BEAC	H FL 32174	ORMOND BEACH FL 32174		DO NOT WRITE IN THIS SPACE
				3. Date Incorporated or Qualified 3a. Date of Last Report 07/25/1996
2. Principal P	lace of Business	2a. Mailing Address	, n	4. FEI Number Applied For 59-2738109 Not Applied by Not Applied For Not Applie
Suite, Apt.	₩, etc.	Suite, Apt. #, etc.		5. Certificate of Status Desired \$8.75 Additional Fee Regulred
22 City & State	e	City & State		6. Election Campaign Financing \$5.00 May Be
23		28		Trust Fund Contribution Added to Fees
Zip 24	Country 25		Country 30	8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30.  Yes No
9, Name and Address of Current Registered Agent  10. Name and Address of New Registered Agent  81 Name				
PATE: P	PANKAJ K.			PATEL SURESH
5 QUEEN ANNE CT			82 Street	Address (P.O. Box Number is Not Acceptable)
ORMOND BCH FL 32174			83	rmond Beach fl 32174
			84 City	rmand Black Pl. FL 85 Zip Code 32174
11. Pursuant to the provisions of Sections 617.0502 and 617.1508, 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. If am familiar with, and accept the obligations of, Section 617.0503, Florida Statutes.				
SIGNATURE .	Signature, typed or printed name of registered ager	e and tille if applicable (NOTE:	RESH FA	TEL 09-16-97
12.	OFFICERS AND		13.	
TITLE	PD	☐ DELETE	1.1 TITLE	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12
NAME	PATEL, VASANTI L		1.2 NAME	
STREET ADDRESS	1108 N ATLANTIC AVE. DAYTONA BCH. FL 32118		1.3 STREET ADDRESS	إلا
CITY-ST-ZIP TITLE	SD	DELETE	1.4 CiTY+ST-ZIP 2.1 TiTLE	SD Change Addition C
NAME	PATEL, SURYAKANT	Ja seeme	2.2 NAME	
STREET ADDRESS	1800 S ATLANTIC AVE.		2.3 STREET ADDRESS	1608 US HWN!
CITY-ST-ZIP	DAYTONA BCH. FL 32118		2. 4 CITY-ST-ZIP	PATEL SUPESH 1608 US HWY! DRMOND BEAUL ', I L 32 174
TITLE	VD	DELETE	3.1 TITLE	☐ Change ☐ Addition
NAME	PATEL, KISHORE		3.2 NAME	
STREET ADDRESS	1608 US HWY 1		3.3 STREET ADDRESS	
CITY-ST-ZIP	ORMOND BCH FL 32174	Do. tre	3.4. CITY-ST-ZIP	
TITLE		☐ DELETE	4.1 TITLE	☐ Change ☐ Addition
NAME			4. 2 NAME	
STREET ADDRESS			4.3 STREET ADDRESS	
CITY-ST-ZIP		DELETE	4.4 CITY-ST-ZIP 5.1 TITLE	☐ Change ☐ Addition
NAME			5.2 NAME	
STREET ADDRESS			5.3 STREET ADDRESS	
CITY-ST-ZIP			5.4 CITY-ST-ZIP	
TITLE		☐ DELETE	6.1 TITLE	' Change Addition
NAME			6.2 NAME	
STREET ADDRESS			6.3 STREET ADDRESS	
CITY-ST-ZIP			6.4 CITY - ST - ZIP	
<ol><li>14. I do heret</li></ol>	by certify that the information supplied	I with this filing does not qualify	for the exemption s	tated 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 617, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address.