


**2004 FOR PROFIT CORPORATION ANNUAL REPORT**

**FILED**  
**Jul 16, 2004 08:00 AM**  
**Secretary of State**

**DOCUMENT # P00000005895**

1. Entity Name  
**REMALI, INC.**



Principal Place of Business <b>2211 DUNHURST LANE          ORLANDO, FL 32835</b>	Mailing Address <b>2211 DUNHURST LANE          ORLANDO, FL 32835</b>
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**DO NOT WRITE IN THIS SPACE**



07132004 No Chg-P CR2E034 (10/03)

4. Fee Number <b>59-3625987</b>	Applied For <input type="checkbox"/> Not Applicable
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5. Certificate of Status Desired  **\$8.75** Additional Fee Required

6. Name and Address of Current Registered Agent

**PATEL, RAJESH  
 2211 DUNHURST LANE  
 ORLANDO, FL 32835**

**DO NOT WRITE IN THIS SPACE**

8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent.

SIGNATURE \_\_\_\_\_ DATE \_\_\_\_\_  
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

**FILE NOW!!! FEE IS \$150.00  
 Due by September 8, 2004**

9. Election Campaign Financing Trust Fund Contribution.  **\$5.00** May Be Added to Fees

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

10. OFFICERS AND DIRECTORS	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	P PATEL, RAJESH 2211 DUNHURST LANE ORLANDO, FL 32835
TITLE NAME STREET ADDRESS CITY - ST - ZIP	VP JITEN, R A 4075 PICCIOLA RD FRUITLAND PARK, FL 34731
TITLE NAME STREET ADDRESS CITY - ST - ZIP	S HARISH, PARIKN 2302 AUTUMN DR TOMS RIVER, NJ 08755
TITLE NAME STREET ADDRESS CITY - ST - ZIP	
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**DO NOT WRITE IN THIS SPACE**

A.H  
~~07/16/04 80002-004 150.00~~  
 000000166564  
 07/16/04-80002-004 155.00

12. 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 report or supplemental 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

**SIGNATURE:** Rajesh Patel Rajesh Patel 7-13-04 407-291-2754  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #