

2004 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Jul 19, 2004 8:00 am
Secretary of State

07-19-2004 90015 041 ***150.00

DOCUMENT # P02000026683

1. Entity Name
JAI Bhole, INC.



Principal Place of Business
1647 MANCHESTER CT.
NAPLES, FL 34109

Mailing Address
1647 MANCHESTER CT.
NAPLES, FL 34109



2. Principal Place of Business

1250 N. AIRPORT PULLING RD

3. Mailing Address

1250 N. AIRPORT PULLING RD

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

NAPLES FL

City & State

NAPLES, FL

Zip

34104

Country

USA

Zip

34104

Country

USA

07112004

Chg-P

CR2E034 (10/03)

4. FEI Number

75-3030084

Applied For

Not Applicable

5. Certificate of Status Desired

☐ \$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

PATEL, AJAY R
1647 MANCHESTER CT.
NAPLES, FL 34109

7. Name and Address of New Registered Agent

Name

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

City

FL

Zip Code

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

Signature, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

6/1/04

**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 P
NAME PATEL, AJAY R
STREET ADDRESS 1647 MANCHESTER CT
CITY-ST-ZIP NAPLES, FL 34109 ☒ Delete

TITLE D
NAME PATEL, NITIN
STREET ADDRESS 282 105TH AVE N
CITY-ST-ZIP NAPLES, FL 34108 ☒ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Delete

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE P
NAME Patel, Ajay R, Patel Sunali A, Patel Roma A [JT TEN]
STREET ADDRESS 1647 Manchester Ct.
CITY-ST-ZIP Naples, FL 34109 ☐ Change ☒ Addition

TITLE D
NAME KISHOR C PATEL
STREET ADDRESS 850 105TH AVE N
CITY-ST-ZIP NAPLES FL 34108 ☐ Change ☒ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Change ☐ Addition

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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

6/1/04

279-269 0126