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Aug 18, 2004 8:00 am
Secretary of State
07-12-2004 90011 007 ***150.00

7/12/

2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT # P03000138212

1. Entity Name
PRASAND MANAGEMENT, INC.

66432168

Principal Place of Business	Mailing Address
13833 S.W. 39 STREET DAVIE, FL 33330	13833 S.W. 39 STREET DAVIE, FL 33330 US

07022004 Chg-P CR2E034 (10/03)

2. Principal Place of Business	3. Mailing Address
Deluxe Inn	1150. S. Fed Hwy.
Suite, Apt. #, etc.	Suite, Apt. #, etc.
City & State	City & State
Zip: FL. Country: Broward	Zip: 33004 Country: Broward

4. FEI Number: 20-0442079 ☐ Applied For ☐ Not Applicable

5. Certificate of Status Desired ☐ $8.75 Additional Fee Required

6. Name and Address of Current Registered Agent	7. Name and Address of New Registered Agent
SCHILLINGER, LEE H 4601 SHERIDAN STREET 202 HOLLYWOOD, FL 33021	Name: TRACY DWELLWRAWA CPA Street Address (P.O. Box Number is Not Acceptable): [illegible] City: SUNRISE FL Zip Code: 33323

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] CPA DATE: 7.5.04

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			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	P PATEL, LATABEN S 13833 S.W. 39 STREET DAVIE, FL 33330	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	VP PATEL, PRASHANT 13833 S.W. 39 STREET DAVIE, FL 33330	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	SECY PATEL, SANDEEP 13833 S.W. 39 STREET DAVIE, FL 33330	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ Change ☐ Addition
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TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Delete	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: Latabeu S. Patel (President) 954-923-1488
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date: 7.5.04 — Daytime Phone #