

**FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00**

CORPORATION  
ANNUAL REPORT  
1995



FLORIDA DEPARTMENT OF STATE  
Sandra D. Northam  
Secretary of State  
DIVISION OF CORPORATIONS

**DOCUMENT # P92000004978 (2)**

1. Corporation Name  
**AMIN, INC.**

Principal Place of Business

1815 S SEMORAN BLVD  
APT. 37  
ORLANDO FL 32822  
US

Mailing Address

1815 S SEMORAN BLVD  
APT. 37  
ORLANDO FL 32822  
US

2. Principal Place of Business

21 Suite, Apt #, etc

22 City & State

23 Zip

2a. Mailing Address

26 Suite, Apt #, etc

27 City & State

28 Zip

29

30

9. Name and Address of Current Registered Agent

**PATIDAR, KIRIT A**  
**1691 WATAUGA AVE #103**  
**ORLANDO FL 32812**

3. Date Incorporated or Qualified

11/12/1992

3a. Date of Last Report

05/01/1994

4. FEI Number

59-3153122

Applied For

Not Applicable

5. Certificate of Status Desired

**\$8.75 Additional  
Fee Required**

6. Election Campaign Financing

**\$5.00 May Be  
Added to Fees**

8. The corporation has adopted the corporation law version of 1993/1997

Florida Statutes

Yes

No

10. Name and Address of New Registered Agent

81 Name

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

83

84 City

**FL**

85

Zip Code

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits the 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. I am familiar with and accept the obligations of Section 607.0505 Florida Statutes.

SIGNATURE

(Signature of current registered agent and the corporation)

(Signature of person who registered agent is replacing)

(Date)

12. OFFICERS AND DIRECTORS

TITLE  
NAME  
STREET ADDRESS  
CITY, ST, ZIP

**D**  
**PATIDAR, KIRIT A**  
**1691 WATAUGA AVE #103**  
**ORLANDO FL**

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE  
1.2 NAME  
1.3 STREET ADDRESS  
1.4 CITY, ST, ZIP

Change  Addition

2.1 TITLE  
2.2 NAME  
2.3 STREET ADDRESS  
2.4 CITY, ST, ZIP

Change  Addition

3.1 TITLE  
3.2 NAME  
3.3 STREET ADDRESS  
3.4 CITY, ST, ZIP

Change  Addition

4.1 TITLE  
4.2 NAME  
4.3 STREET ADDRESS  
4.4 CITY, ST, ZIP

Change  Addition

5.1 TITLE  
5.2 NAME  
5.3 STREET ADDRESS  
5.4 CITY, ST, ZIP

Change  Addition

6.1 TITLE  
6.2 NAME  
6.3 STREET ADDRESS  
6.4 CITY, ST, ZIP

Change  Addition

**REMITTED BY MAY 1**

SIGNATURE:

*[Handwritten Signature]*  
SIGNATURE AND TYPED PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

*[Handwritten Signature]*  
Date

*[Handwritten Signature]*  
Signature of Secretary