

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

PROFIT
CORPORATION
ANNUAL REPORT
1996



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P92000013610 (0)

1. Corporation Name

INDRANIE ENTERPRISES, INC.



Principal Place of Business

2544 RIVERTREE CIR
SANFORD FL 32771

Mailing Address

2544 RIVERTREE CIR
SANFORD FL 32771

3. Date Incorporated or Qualified
12/23/1992

3a. Date of Last Report
05/01/1995

2. Principal Place of Business

2a. Mailing Address

21 6470 Raleigh St

26 6470 Raleigh St

4. Fee Number

59-3153957

Applied For

Not Applicable

22 Suite, Apt. #, etc.

27 Suite, Apt. #, etc.

5. Certificate of Status Desired

\$8.75 Additional
Fee Required

23 City & State

28 City & State

6. Election Campaign Financing
Trust Fund Contribution

\$5.00 May Be
Added to Fees

24 Zip

25 Country

29 Zip

30 Country

8. This corporation has liability for intangible tax under s. 199.032,
Florida Statutes ☐ Yes ☐ No

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

PERSAUD, INDRANIE
2544 RIVERTREE CIR
SANFORD FL 32771

81 Name

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

83 City

84 State

FL

85 Zip Code

11. Pursuant to the provisions of Sections 607.0502 and 607.1506, 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. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE

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

(NOTE: Registered Agent signature required when furnishing)

(DATE)

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE	P	DELETE
NAME	PERSAUD, ISRI	
STREET ADDRESS	2544 RIVERTREE CIR	
CITY-STATE-ZIP	SANFORD FL 32771	
TITLE	S	DELETE
NAME	PERSAUD, INDRANIE	
STREET ADDRESS	2544 RIVERTREE CIR	
CITY-STATE-ZIP	SANFORD FL 32771	
TITLE		DELETE
NAME		
STREET ADDRESS		
CITY-STATE-ZIP		
TITLE		DELETE
NAME		
STREET ADDRESS		
CITY-STATE-ZIP		
TITLE		DELETE
NAME		
STREET ADDRESS		
CITY-STATE-ZIP		

1. TITLE	Change	Addition
1.2 NAME	6470 Raleigh St	
1.3 STREET ADDRESS	Orlando FL 32835	
1.4 CITY-STATE-ZIP		
2. TITLE	Change	Addition
2.2 NAME	6470 Raleigh St	
2.3 STREET ADDRESS	Orlando FL 32835	
2.4 CITY-STATE-ZIP		
3. TITLE	Change	Addition
3.2 NAME		
3.3 STREET ADDRESS		
3.4 CITY-STATE-ZIP		
4. TITLE	Change	Addition
4.2 NAME		
4.3 STREET ADDRESS		
4.4 CITY-STATE-ZIP		
5. TITLE	Change	Addition
5.2 NAME		
5.3 STREET ADDRESS		
5.4 CITY-STATE-ZIP		
6. TITLE	Change	Addition
6.2 NAME		
6.3 STREET ADDRESS		
6.4 CITY-STATE-ZIP		

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), 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 607, Florida Statutes, and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

3/3/88/007/5285282

Date/Time/Phone #

CR2E034 (12/95)