## FILE NOW: FILING FEE AFTER MAY 1 IS \$550.00

PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

1997

DOCUMENT #

P93000000965 (2)

SHRI JALARAMBAPA, INC.

Principal Place of Business

Mailing Address

FILED Feb 17 1997 8:00am Secretary of State



900 HARRISON PANAMA CITY US										
						3. Date Incorporated or Qualified 12/31/1992	02/20/1996			
2. Principal Pla		2a. Mailing Address	<b>,</b>	1	· Aus-	4. FEI Number			pplied For	_
	HARRISON /		<u> </u>	٥N	T WARE.	59-3157469			ot Applicable	4
Suite, Apt. #		Suite, Apt. #, etc.				6. Certificate of Status Desired			Additional equired	
City & State  PANAMACITY, FL  28 PANAMAC				1,	FL	6. Election Campaign Financing Trust Fund Contribution				
24 324	1		30 Cot	intry I	BAY		Yes 2	No.	i. 199.032,	
9. Name and Address of Current Registered Agent						10. Name and Address of New Re	gistered .	Agent		4
PATI	el, Chhaganial G			81	Name					Ì
5003 W. HWY. 98 PANAMA CITY FL 32401				82	Street Addr	Street Address (P.O. Box Number is Not Acceptable)				
				83						
			<u>.</u>	84	City		FL		Code	
11. Pursuant to office or re	o the provisions of Sections 6 egistered agent, or both, in the familia with and about the	607.0502 and 607.1508, Florida Statu ne State of Florida. Such change was ne obligations of Section 607.0505. F	ites, the a authorize	bove d by	e-named corp the corporati	coration submits this statement for the ion's board of directors. I hereby acce	ourpose of pt the app	changing i gintment as	ts registered registered	
SIGNATURE	all party s	SATI SHKUMAR PI	ATEL	. (	SEC. 2	4 TREASURER /	2/4/	197		
12.		stered agent and title if applicable (NO IRS AND DIRECTORS	TE Registere	d Age	nt signature require	ed when reinstating) ADDITIONS/CHANGES TO OFFI	DATE	) DIRECTO	RS IN 12	1
TITLE	ST	DELETE	1,1 7	IT) F	<del></del>	ADDITIONO/OTANGED TO OTT	JENO AND	☐ Change	Addition	0
NAME	PATEL, SATISHKUMAR		1.2 N					g-		2
STREET ADDRESS	900 HARRISON AVE	***			ADDRESS					18
CITY-ST-ZIP	PANAMA CITY FL		1	17Y-\$	1					12
THLE	0	DELETE	21 T	•	· • "			Change	Addition	18
NAME	PATEL, NIRU		2.2 N	AME				-		
STREET ADDRESS	5003 W. HWY 98		2.3 \$	TREET	ADDRESS					
C/TY-S1-7IP	PANAMA CITY FL 3240	1	2.43	HTY-S	5T-21P	19				
TITLE		DELETE	3.1 T				74,	Change	Addition	1
NAME			3.2 N	IAME						
STREET ADDRESS			3.3 S	TREET	ADDRESS		÷			
CITY+S1+ZIP			34.0	OTY-S	ST-ZIP					
TITLE		☐ DELETE	4.1 T	ITLE				Change	Addition	
NAME			4.21	NAME						
STREET ADDRESS			43S	TREET	ADDRESS					
CHY-ST-ZIP	V 14 - 2/2		440	ITY-S	T-ZiP					╛
TITLE		DELETE	5.1 T	ITLE				Change	Addition	-
NAME			5.2 N	IAME						
STREET ADDRESS			5.3 S	TREET	ADDRESS					
CITY-ST-ZIP				ITY-S	T-ZIP					1
TITLE		☐ DELETE	6.1 T	ITLE				Change	Addition	
NAME			6.2 N	IAME						
STREET ADDRESS			6,3 \$	TREET	ADDRESS					
CHY-ST-ZIP				ITY - \$						╛
I. 14. Lido hereb	by certify that the information.	supplied with this filling does not gua	lify for the	exe	motion stated	d in Section 119.07(3)(i). Florida Statut	as Liurthe	r certify that	t the	- 1

1 to 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 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 BIGNING STEEPER OR DIRECTOR

1/9/97 (90h) 769-210