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 # P93000001933 (9)

1. Corporation Name
WEEKIWACHEE INVESTMENT, INC.

Principal Place of Business
5574 COMMERCIAL WAY
SPRINGHILL FL 34606
US

Mailing Address
5574 COMMERCIAL WAY
SPRINGHILL FL 34606

3. Date Incorporated or Qualified: 01/04/1993
3a. Date of Last Report: 05/01/1995
4. FEI Number: 59-3162883 [ ] Applied For [ ] Not Applicable
5. Certificate of Status Desired [ ] — $8.75 Additional Fee Required
6. Election Campaign Financing Trust Fund Contribution [ ] — $5.00 May Be Added to Fees
8. The corporation has liability for intangible tax under s. 199.032, Florida Statutes. [X] Yes [ ] No

2. Principal Place of Business
21
Suite, Apt. #, etc.
22
City & State
23
Zip 24 Country 25

2a. Mailing Address
26
Suite, Apt. #, etc.
27
City & State
28
Zip 29 Country 30

9. **Name and Address of Current Registered Agent**

GANDHI, DINESH
1817 MEMORIAL BLVD
LAKELAND FL 33801

10. **Name and Address of New Registered Agent**

81 Name: GANDHI DINESH
82 Street Address (P.O. Box Number is Not Acceptable): 5574 COMMERCIAL WAY
83 U.S. 19 & NORTHCLIFF BL
84 City: SPRING HILL FL 85 Zip Code: 34606

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, 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

12. OFFICERS AND DIRECTORS

TITLE	D	[ ] DELETE
NAME	GANDHI, DINESH	
STREET ADDRESS	1817 MEMORIAL BLVD	
CITY-ST-ZIP	LAKELAND FL 33801	
TITLE	D	[ ] DELETE
NAME	GANDHI, JOYTI	
STREET ADDRESS	1817 MEMORIAL BLVD	
CITY-ST-ZIP	LAKELAND FL 33801	
TITLE		[ ] DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		[ ] DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		[ ] DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		[ ] DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1 TITLE		[X] Change [ ] Addition
1 NAME	GANDHI DINESH, A	
1 STREET ADDRESS	5574 COMMERCIAL WAY	
1 CITY-ST-ZIP	SPRING HILL FL 34606	
2 TITLE	GANDHI JYOTI	[X] Change [ ] Addition
2 NAME		
2 STREET ADDRESS	5574 COMMERCIAL WAY	
2 CITY-ST-ZIP	SPRING HILL FL 34606	
3 TITLE		[ ] Change [ ] Addition
3 NAME		
3 STREET ADDRESS		
3 CITY-ST-ZIP		
4 TITLE		[ ] Change [ ] Addition
4 NAME		
4 STREET ADDRESS		
4 CITY-ST-ZIP		
5 TITLE		[ ] Change [ ] Addition
5 NAME		
5 STREET ADDRESS		
5 CITY-ST-ZIP		
6 TITLE		[ ] Change [ ] Addition
6 NAME		
6 STREET ADDRESS		
6 CITY-ST-ZIP		

14. I do 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 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE: [signature]
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date: 1/26/96

CR2E034 (12/95)