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

PROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

FILED

Apr 13 1998 8:00am

Secretary of State

Sandra B. Mortham

Secretary of Stale DIVISION OF CORPORATIONS

DOCUI 1. Corporation BROSIS		0012421 (2))							
Principal Place of Business		Mailing Address	٠	.2 Box.600			MINE 41111 BRIEL PRES	fiktik matny tih	(# 10 0 00 #1000 #1	(BB) ((B) (BB)
1125 YOUNG BLVD. CHREFLND FL 32826		-RT-9-BOX-179-	⟨ † ⋅ ₹	1300x.60	08					
		LAKE CITY FL 32024 US				DO NOT WRITE IN THIS SPACE				
İ						3. Date Incorpor	rated or Qualified			
						02/11/199)3			
	ace of Business	2a, Mailing Address				4. FEI Number	AFA			pplied For
21 Suite Act	# oto	Suite, Apt. #, etc.	··· - · · · ·			59-3168	USU			lot Applicable
Suite, Apt.	#, etc.	27 Stille, Apt. #, etc.				5. Certificate of	Status Desired			Additional Required
City & State	9	City & State				6. Election Cam	gaigo Financino			May Be
23		28				Trust Fund Co			•	I to Fees
Zip	Country	Zip	Cou	intry		8, This corporati	ion owes or has p	aid the cui	rrept year Ir	ntangible
24	25	29	30				erly Tax due Jun			□ No
	g. Name and Address of Current	Registered Agent				10. Name and A	ddress of New R	egistered	Agent	
PATEL, KOKILA				81 Name						
1125 YOUNG BLVD.				82 Street	Addres	s (P.O. Box Numb	er is Not Accepta	able)		
Un	IEFLND FL 32626			83						
1										
ļ				84 City				FI	85 Zip	Code
agent. Lai SIGNATURE	to the provisions of Sections 607,0502 opistered agent, or both, in the State on familiar with, and accept the obligations of registered agents.	ions of, Section 607.0505, F	lorida Sta	bove-named id by the corp tutes.		when reinstating)		DATE		
12	OFFICERS AND		13.			ADDITIONS/CI	HANGES TO OFF	ICERS AND		
TITLE	PATEL, S.S.	DELETE	1.1 T]				Change	Addition
NAME STREET ADDRESS	PATEL, S.S. BT. 3, BOX 178- R1-2 (30x,6008	1.2 N	AME	0+	ce city,	6008			
CITY-ST-ZIP	LAKE CITY FL -32024		1.3 5	INEET KUUNESS •		co citi	61-32	124		
TITLE	D	DELETE	2.1 TI	TLF	u	ce chy	1003		Change	Addition
NAME	PATEL, KOKILA	-	2.2 №)					_
STREET ADDRESS	1125 YOUNG BLVD.		2.3 \$	TREE1 ADDRESS						
CITY-ST-ZIP	CHIEFLND FL 32626		2.40	ITY-S1-ZIP						
TITLE		☐ DELETE	3.1 TI	TLE					Change	Addition
NAME			3.2 N	AME						
STREET ADDRESS			33 S	TREET ADDRESS						
CITY-ST-ZIP		DELETE		HY-ST-ZIP	ļ				Change	Addition
TITLE			4.1 71						L.J Change	TITI MOUIBOIL
NAME STREET ADDRESS			4.21	TREET ADDRESS	ļ					
l J			The state of	ITY-ST-ZIP						
CITY-ST-ZIP TITLE		DELETE	5.1 1		† 				Change	Addition
NAME			5.2 N						-	
STREET ADDRESS			5.3 S	TREET ADDRESS						
CITY-ST-ZIP	·		54C	ITY-ST-ZIP						
TITLE		DELETE	6.1 T	TLE					Change	Addition
NAME			6.2 N	AME						
STREET ADDRESS			6.3 S	TREE1 ADDRESS						

14. Thereby 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 of the exemption of the corporation or the receiver of the execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or or an attachment with an address.