

SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER AUGUST 9, 1998.
AMOUNT DUE ON OR BEFORE 8/9/98: \$225 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$375)

PROFIT
CORPORATION
ANNUAL REPORT
1995



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

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS

95 JUL -3 AM 8:40

DOCUMENT # P93000017352 (4)

1. Corporation Name

SATYA INVESTMENTS, INC.

Principal Place of Business

112 PARADISE VALLEY CT
DAYTONA BEACH FL 32114
US

Mailing Address

112 PARADISE VALLEY CT
DAYTONA BEACH FL 32114
US

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

03/08/1993

3a. Date of Last Report

04/08/1994

4. FEI Number

59-3174119

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. This corporation has liability for intangible tax under s. 199.035,
Florida Statutes ☐ Yes ☒ No

2. Principal Place of Business

21

Suite, Apt. #, etc.

22

City & State

23

Zip

County

24

2a. Mailing Address

25

Suite, Apt. #, etc.

26

City & State

27

Zip

County

28

29

30

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

REYS, JOHN C ESO
648 SOUTH RIDGEWOOD AVENUE
DAYTONA BEACH FL 32114

81 Name
ROBERT L. JOHNSON

82 Street Address (P.O. Box Number is Not Acceptable)
220 S. RIDGEWOOD AVE

83 SUITE 200

84 City
DAYTONA BEACH

FL

85 Zip Code
32114

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 provisions of Section 607.0505, Florida Statutes.

SIGNATURE

Robert L. Johnson, CPA

6-28-95

12. OFFICERS AND DIRECTORS

TITLE	P
NAME	SASTRI, JHOLA
STREET ADDRESS	112 PARADISE VALLEY CT
CITY, ST, ZIP	DAYTONA BEACH FL
TITLE	S
NAME	SASTRI, M S
STREET ADDRESS	112 PARADISE VALLEY CT
CITY, ST, ZIP	DAYTONA BEACH FL
TITLE	
NAME	
STREET ADDRESS	
CITY, ST, ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY, ST, ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY, ST, ZIP	

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE	☐ Change ☐ Addition
1.2 NAME	
1.3 STREET ADDRESS	
1.4 CITY, ST, ZIP	
2.1 TITLE	☐ Change ☐ Addition
2.2 NAME	
2.3 STREET ADDRESS	
2.4 CITY, ST, ZIP	
3.1 TITLE	☐ Change ☐ Addition
3.2 NAME	
3.3 STREET ADDRESS	
3.4 CITY, ST, ZIP	
4.1 TITLE	☐ Change ☐ Addition
4.2 NAME	
4.3 STREET ADDRESS	
4.4 CITY, ST, ZIP	
5.1 TITLE	☐ Change ☐ Addition
5.2 NAME	
5.3 STREET ADDRESS	
5.4 CITY, ST, ZIP	
6.1 TITLE	☐ Change ☐ Addition
6.2 NAME	
6.3 STREET ADDRESS	
6.4 CITY, ST, 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 110.07(3)(b), 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

H. S. SASTRI

6/28/95

904-211-1391