

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

FILED
Feb 06 1998 8:00am
Secretary of State

PROFIT CORPORATION ANNUAL REPORT 1998		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
--	---	--

DOCUMENT # P93000050350 (6)

1. Corporation Name

SURREY INTERNATIONAL ENTERPRISES CORP.

Principal Place of Business

2640 CESERY BLVD 19
JACKSONVILLE FL 32211

Mailing Address

2640 CESERY BLVD 19
JACKSONVILLE FL 32211

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business		2a. Mailing Address		3. Date Incorporated or Qualified	
21	1211 PINETREE DRIVE	26	1211 PINETREE DRIVE	07/19/1993	
Suite, Apt. #, etc.		Suite, Apt. #, etc.		4. FEI Number	
22 INDIAN HARBOUR BEACH		27 INDIAN HARBOUR BEACH		59-3195082	
City & State FLORIDA		City & State FLORIDA		Applied For	
23		28		Not Applicable	
Zip 32937		Country U.S.A.		5. Certificate of Status Desired <input type="checkbox"/>	
24		29		\$8.75 Additional Fee Required	
30		31		6. Election Campaign Financing	
32		33		Trust Fund Contribution <input type="checkbox"/>	
34		35		\$5.00 May Be Added to Fees	
36		37		8. This corporation owes or has paid the current year Intangible	
38		39		Personal Property Tax due June 30. <input type="checkbox"/> Yes <input type="checkbox"/> No	

9. Name and Address of Current Registered Agent

ELKINS, HAROLD
6081 MERRILL DR
JACKSONVILLE FL 32277

10. Name and Address of New Registered Agent

81 Name PATIDAR, DIPAK
82 Street Address (P.O. Box Number is Not Acceptable)
2900 N-HWY A1A
83
84 City INDIALANTIC FL 85 Zip Code 32903

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

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

(NOTE: Registered Agent signature required when registering)

DATE

SHAILESH SHAH - PRESIDENT

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	PD	1.1 TITLE	PD
NAME	SHAH, SHAILESH	1.2 NAME	SHAH, SHAILESH
STREET ADDRESS	2640 CESERY BLVD 19	1.3 STREET ADDRESS	1211 PINETREE DRIVE
CITY-ST-ZIP	JACKSONVILLE-FL 32211	1.4 CITY-ST-ZIP	INDIAN HARBOUR BEACH, FL-32937
TITLE		2.1 TITLE	
NAME		2.2 NAME	
STREET ADDRESS		2.3 STREET ADDRESS	
CITY-ST-ZIP		2.4 CITY-ST-ZIP	
TITLE		3.1 TITLE	
NAME		3.2 NAME	
STREET ADDRESS		3.3 STREET ADDRESS	
CITY-ST-ZIP		3.4 CITY-ST-ZIP	
TITLE		4.1 TITLE	
NAME		4.2 NAME	
STREET ADDRESS		4.3 STREET ADDRESS	
CITY-ST-ZIP		4.4 CITY-ST-ZIP	
TITLE		5.1 TITLE	
NAME		5.2 NAME	
STREET ADDRESS		5.3 STREET ADDRESS	
CITY-ST-ZIP		5.4 CITY-ST-ZIP	
TITLE		6.1 TITLE	
NAME		6.2 NAME	
STREET ADDRESS		6.3 STREET ADDRESS	
CITY-ST-ZIP		6.4 CITY-ST-ZIP	

14. I 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:

S. SHAH

SHAILESH SHAH

1-407-777-5590

CR2E034 (10/97)