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

PROFIT * CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

FILED

Feb 13, 1999 8:00 am Secretary of State

02-13-1999 90030 048 ***150.00

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # **P93000050350**1. Corporation Name

CITY-ST-ZIP

SIGNATURE:

SURREY INTERNATIONAL ENTERPRISES CORP.

OOTHIET	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,							
Principal Place	of Business	Mailing Address		-	# 18851881 114 (9108 31151 90111 99111 9	Offi mulbe fitter Anion biras atres at	.,,,,,,,,	
1211 PINETREE DR		1211 PINETREE DR						
INDIAN HARBOUR BEACH FL 32937		INDIAN HARBOUR BEACH FL 32937		DO NOT WRITE IN THIS SPACE				
US		US			3. Date Incorporated or Qualifed			
					07/19/1993			
9 D : : D	of Discipans	2a. Mailing Address			4. FEI Number	Applied	For	
 1	ace of Business	26			59-3195082	Not App	licable	
21 Suite, Apt. #	# etc	Suite, Apt. #, etc.				\$8.75 Addition	onal	
22		27	27		5. Certificate of Status Desired L	Fee Require	d	
City & State		City & State			6. Election Campaign Financing	_{-,} \$5.00 мау і		
23		28	28		Trust Fund Contribution Added to Fees			
Zip Country		Zip	Zip Country		8. This corporation owes the current year Intangible			
24	25	29	30		Personal Property Tax.		-	
	9. Name and Address of Cur	rent Registered Agent			10. Name and Address of New Reg	istered Agent		
				81 Name				
PATIDAR, DIPAK				82 Street Add	Idress (P.O. Box Number is Not Acceptable)			
	N HWY A1A				1			
INUIA	ALANTIC FL 32903			83				
				84 City		85 Zip'Code'	2 2 1 1 2 1 1	
					ties submits this statement for the nu	mose of changing its regis	tered	
11. Pursuant	to the provisions of Sections 607.	0502 and 607.1508, Florida S ate of Florida. Such change w	Statutes, the a vas authorized	bove-named corp d by the corporati	poration submits this statement for the purion's board of directors. I hereby accept the	he appointment as register	ed	
agent. I ar	m familiar with, and accept the ob	ligations of, Seation 70.0505	5, Florida Stat	utes.		1/2/10	09	
SIGNATURE	i/	1 / for	, , , , , , , , , , , , , , , , , , ,	d Agent signature require	L dubon coinstating)	DATE //6/7	-/	
	Signature, typed or printed name of registered	AND DIRECTORS	(NOTE: Registered	Agent signature require	ADDITIONS/CHANGES TO OFFIC	· — / — / — —	N 12	
12.	PD	DELET		TLE			Addition	
TITLE			1.2 N		* *		Ì	
NAME SHAH, SHAILESH								
STREET ADDRESS 1211 PINETREE DR			13.5	TREET ADDRESS				
CITY-ST-ZIP	I INDIAN HADBOILD BEACH !	El 32037		TREET ADDRESS				
	INDIAN HARBOUR BEACH	FL 32937	1.4 C	ITY-ST-ZIP		☐ Change] Addition	
TITLE	Indian Harbour Beach		1.4 C	ITY-ST-ZIP		Change] Addition	
NAME	indian Harbour Beach I		1.4 CI TE 2.1 TI 2.2 N	ITY-ST-ZIP		☐ Change ☐] Addition	
NAME STREET ADDRESS	indian Harbour Beach I		1.4 Cl TE 2.1 Tl 2.2 N 2.3 S	ITY-ST-ZIP ITLE IAME ITREET ADDRESS				
NAME STREET ADDRESS CITY-ST-ZIP	INDIAN HARBOUR BEACH		1.4 C 7E 2.1 TI 2.2 N 2.3 S 2.4 C	ITY-ST-ZIP ITLE IAME TREET ADDRESS CITY-ST-ZIP			Addition Addition	
NAME STREET ADDRESS CITY-ST-ZIP TITLE	INDIAN HARBOUR BEACH	☐ DELE	1.4 C TE 2.1 TI 2.2 No. 2.3 S 2.4 C	ITY-ST-ZIP ITLE IAME ITREET ADDRESS CITY-ST-ZIP ITLE				
NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME	INDIAN HARBOUR BEACH	☐ DELE	1.4 CI TE 2.1 TI 2.2 N 2.3 S 2.4 C TE 3.1 TI 3.2 N	ITY-ST-ZIP ITLE IAME ITREET ADDRESS CITY-ST-ZIP ITLE				
NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS	INDIAN HARBOUR BEACH	☐ DELE	1.4 CI TE 2.1 TI 2.2 N 2.3 S 2.4 C TE 3.1 TI 3.2 N 3.3 S	ITY-ST-ZIP ITLE IAME ITREET ADDRESS CITY-ST-ZIP ITLE IAME		Change _] Addition	
NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP	INDIAN HARBOUR BEACH	☐ DELE	14CI TE 2.1TI 22 N. 2.3 S 2.4 C 3.1 TI 3.2 N. 3.3 S 3.4.6	ITY-ST-ZIP ITLE IAME ITREET ADDRESS CITY-ST-ZIP ITLE IAME STREET ADDRESS CITY-ST-ZIP		Change _		
NAME STREET ADDRESS CITY- ST- ZIP TITLE NAME STREET ADDRESS CITY- ST- ZIP TITLE	INDIAN HARBOUR BEACH	☐ DELE	14Cl FE 2.1Tl 22 N 2.3 S 2.4 C TE 3.1 Tl 3.2 N 3.3 S 3.4 C	ITY-ST-ZIP ITLE IAME ITREET ADDRESS CITY-ST-ZIP ITLE IAME STREET ADDRESS CITY-ST-ZIP		Change _] Addition	
NAME STREET ADDRESS CITY- ST- ZIP TITLE NAME STREET ADDRESS CITY- ST- ZIP TITLE NAME	INDIAN HARBOUR BEACH	☐ DELE	14Cl FE 2.1Tl 22 N 2.3 S 2.4 C TE 3.1 Tl 3.2 N 3.3 S 3.4 C TE 4.1 Tl 4.2 P	ITY-ST-ZIP ITLE IAME TREET ADDRESS CITY-ST-ZIP ITLE IAME STREET ADDRESS CITY-ST-ZIP TITLE ITTLE ITTLE ITTLE ITTLE ITTLE ITTLE		Change _] Addition	
NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS	INDIAN HARBOUR BEACH	☐ DELE	14Cl FE 2.1Tl 22N 2.3S 2.4C TE 3.1Tl 3.2N 3.3S 3.4.C TE 4.1Tl 4.27 4.3S	ITY-ST-ZIP ITLE IAME TREET ADDRESS CITY-ST-ZIP ITLE IAME STREET ADDRESS CITY-ST-ZIP TITLE ITTLE VAME		Change Change] Addition	
NAME STREET ADDRESS CITY- ST- ZIP TITLE NAME STREET ADDRESS CITY- ST- ZIP TITLE NAME	INDIAN HARBOUR BEACH	☐ DELE	14Cl FE 2.1Tl 22 N 23 S 2.4C TE 3.1 Tl 32 N 3.3 S 3.4,C TE 4.1 Tl 4.2 P 4.3 S 4.4 C	ITY-ST-ZIP ITLE IAME TREET ADDRESS TITLE IAME STREET ADDRESS CITY-ST-ZIP TITLE VAME STREET ADDRESS CITY-ST-ZIP TITLE VAME STREET ADDRESS CITY-ST-ZIP		Change C	Addition Addition	
NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP	INDIAN HARBOUR BEACH	☐ DELE	14Cl FE 21Tl 22 N 23 S 2.4C TE 31 Tl 32 N 3.3 S 3.4.C TE 4.1 Tl 4.27 4.3 S 4.4C TE 5.1 T	ITY-ST-ZIP ITLE IAME TREET ADDRESS TITLE IAME STREET ADDRESS CITY-ST-ZIP TITLE VAME STREET ADDRESS CITY-ST-ZIP TITLE VAME STREET ADDRESS CITY-ST-ZIP		Change C	Addition Addition	
NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME TITLE NAME NAME		☐ DELE	14Cl FE 2.1Tl 22 N 2.3 S 2.4 C TE 3.1 Tl 32 N 3.3 S 3.4 C TE 4.1 Tl 4.2 c 4.3 S 4.4 C TE 5.1 Tl 5.2 N	ITY-ST-ZIP ITLE IAME ITREET ADDRESS CITY-ST-ZIP ITLE IAME ITREET ADDRESS CITY-ST-ZIP ITLE VAME STREET ADDRESS CITY-ST-ZIP ITLE VAME STREET ADDRESS CITY-ST-ZIP		Change C	Addition Addition	
NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME TREET ADDRESS CITY-ST-ZIP TITLE		☐ DELE	14CL TE 2.1TL 22 N 2.3 S 2.4 C TE 3.1 TL 3.2 N 3.3 S 3.4 C TE 4.1 TL 4.2 C 4.3 S 4.4 C TE 5.1 TL 5.2 N 5.3 S 5.4 C	ITY-ST-ZIP ITLE IAME ITREET ADDRESS CITY-ST-ZIP ITLE IAME STREET ADDRESS CITY-ST-ZIP		Change Change	Addition Addition	
NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS		☐ DELE	14CL TE 2.1TL 22 N 2.3 S 2.4 C TE 3.1 TL 3.2 N 3.3 S 3.4 C TE 4.1 TL 4.2 C 4.3 S 4.4 C TE 5.1 TL 5.2 N 5.3 S 5.4 C TE 6.1 TL	ITY-ST-ZIP ITLE IAME ITREET ADDRESS CITY-ST-ZIP ITLE IAME STREET ADDRESS CITY-ST-ZIP ITLE ITTLE		Change Change	Addition Addition	
NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ DELE	14CL TE 2.1TL 22N 2.3S 2.4C TE 3.1TL 3.2N 3.3S 3.4.C TE 4.1TL 4.20 4.3S 4.4C TE 5.1TL 5.2N 5.3S 5.4C TE 6.1TL 6.2N	ITY-ST-ZIP ITLE IAME ITREET ADDRESS CITY-ST-ZIP ITLE IAME STREET ADDRESS CITY-ST-ZIP		Change Change	Addition Addition	

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, with all other like empowered.