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Apr 22, 1999 8:00 am  
Secretary of State

04-22-1999 90145 044 \*\*\*150.00

PROFIT  
CORPORATION  
ANNUAL REPORT  
1999



FLORIDA DEPARTMENT OF STATE  
Katherine Harris  
Secretary of State  
DIVISION OF CORPORATIONS

DOCUMENT # P93000056245

1. Corporation Name  
SHIV-KRUPA, INC.

Principal Place of Business  
138 BEACH COMBER ST.  
DAYTONA BEACH FL 32118

Mailing Address  
2626 S. ATLANTIC AVE  
507  
DAYTONA BEACH FL 32118  
US

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

08/09/1993

2. Principal Place of Business

21 Suite, Apt. #, etc.

22 City & State

23 Zip Country

24 25

2a. Mailing Address

26 162 Florida Shores Blvd

27 Suite, Apt. #, etc.

28 City & State

29 32118 30 USA

4. FEI Number

59-3197922

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 owes the current year Intangible

Personal Property Tax.

Yes No

9. Name and Address of Current Registered Agent

DESAI DHARMESH  
2626 S. ATLANTIC AVE  
#507  
DAYTONA BEACH FL 32118

10. Name and Address of New Registered Agent

81 Name

DESAI DHARMESH

82 Street Address (P.O. Box Number is Not Acceptable)

83 162 Florida Shores Blvd.

84 City

Daytona beach shores

FL

85 Zip Code

32118

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 reinstating)

DATE

12. OFFICERS AND DIRECTORS

TITLE P ☐ DELETE

NAME DESAI, DHARMESH  
STREET ADDRESS 2626 S. ATLANTIC AVE., #507  
CITY-ST-ZIP DAYTONA BEACH FL

TITLE V ☐ DELETE

NAME DESAI, RITA D  
STREET ADDRESS 2626 S. ATLANTIC AVE., #507  
CITY-ST-ZIP DAYTONA BEACH FL

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

1.1 TITLE ☐ Change ☐ Addition

1.2 NAME  
1.3 STREET ADDRESS 162 Florida Shores Blvd  
1.4 CITY-ST-ZIP Daytona beach shores, FL 32118

2.1 TITLE ☐ Change ☐ Addition

2.2 NAME  
2.3 STREET ADDRESS 162 Florida Shores Blvd.  
2.4 CITY-ST-ZIP Daytona beach shores, FL 32118

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 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.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E034 (1/198)