FILE NOW: FILING FEE AFTER MAY 1 IS $225.00

CORPORATION ANNUAL REPORT **1995**

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

APPROVED AND FILED

95 MAY 11 PM 10:35

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # **P94000009743 (3)**

1. Corporate Name
PREMAL ENTERPRISES, INC.

Principal Place of Business	Mailing Address
12691 SEMINOLE BLVD. LARGO FL 34648	12691 SEMINOLE BLVD. LARGO FL 34648

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified: **01/31/1994** | 3a. Date of Last Report:

2. Principal Place of Business (21) | 2a. Mailing Address (26)

Suite, Apt. #, etc. (22) | Suite, Apt. #, etc. (27)

City & State (23) | City & State (28)

(24) (25) | (29) (30)

4. FEI Number: **59-3228886** | ☐ 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. 199.032, Florida Statutes ☐ Yes ☒ No

9. Name and Address of Current Registered Agent

DESAI, RASHMI S
12691 SEMINOLE BLVD.
LARGO FL 34648

10. Name and Address of New Registered Agent

(81) Name

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

(83)

(84) City **FL** (85) Zip Code

11. Pursuant to the provisions of Sections 607.1007 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: Rashmi S. Desai (Registered Agent Signature required for each change) DATE: 5-7-95

12. OFFICERS AND DIRECTORS		13. ADDITIONS, CHANGES TO OFFICERS AND DIRECTORS, ETC.
(70) TITLE NAME STREET ADDRESS CITY-ST-ZIP	D DESAI, RASHMI S 12691 SEMINOLE BLVD. LARGO FL 34648	(71) TITLE NAME STREET ADDRESS CITY-ST-ZIP ☐ Change ☐ Addition
(72) TITLE NAME STREET ADDRESS CITY-ST-ZIP		(73) TITLE NAME STREET ADDRESS CITY-ST-ZIP ☐ Change ☐ Addition
(74) TITLE NAME STREET ADDRESS CITY-ST-ZIP		(75) TITLE NAME STREET ADDRESS CITY-ST-ZIP ☐ Change ☐ Addition
(76) TITLE NAME STREET ADDRESS CITY-ST-ZIP		(77) TITLE NAME STREET ADDRESS CITY-ST-ZIP ☐ Change ☐ Addition
(78) TITLE NAME STREET ADDRESS CITY-ST-ZIP		(79) TITLE NAME STREET ADDRESS CITY-ST-ZIP ☐ Change ☐ Addition
(80) TITLE NAME STREET ADDRESS CITY-ST-ZIP		(81) TITLE NAME STREET ADDRESS CITY-ST-ZIP ☐ Change ☐ Addition

14. To the best of my knowledge, the information supplied with this report is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report or supplemental annual report is true and accurate and that my signature shall serve 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 above, or on an attachment with an address.

SIGNATURE: Rashmi S. Desai RASHMI S. DESAI 5-7-95 813-586-6325
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone Number

0371997 CP