

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

PROFIT
CORPORATION
ANNUAL REPORT
1999



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

DOCUMENT # P940000014079
1. Corporation Name: TRUSHA ENTERPRISES
INC.

Principal Place of Business

Mailing Address

711, N. DIXIE AVE,
TITUSVILLE,
FLA. 32796

2. Principal Place of Business

2a. Mailing Address

21 Suite, Apt. #, etc.

26 Suite, Apt. #, etc.

22 City & State

27 City & State

23 Zip

Country

28 Zip

Country

24

25

29

30

9. Name and Address of Current Registered Agent

JAGRUTI. B. PATEL.
711, N. DIXIE AVE,
TITUSVILLE,
FLA. 32796

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 607.0502 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: Jagruti. B. Patel

2-11-99

(NOTE: Registered Agent signature required when effect of filing)

12. OFFICERS AND DIRECTORS

JAGRUTI. B. PATEL. [DELETE]
271, LAKE SHORE DR. (P800)
M.I., FLA. 32953 [DELETE]

[DELETE]
[DELETE]
[DELETE]

[DELETE]
[DELETE]
[DELETE]

[DELETE]
[DELETE]
[DELETE]

[DELETE]
[DELETE]
[DELETE]

[DELETE]
[DELETE]
[DELETE]

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

JAGRUTI. B. PATEL. [Change] [Addition]
271, LAKE SHORE DR. (President)
M.I., FLA. 32953 [Change] [Addition]

[Change] [Addition]
[Change] [Addition]

[Change] [Addition]
[Change] [Addition]

[Change] [Addition]
[Change] [Addition]

[Change] [Addition]
[Change] [Addition]

[Change] [Addition]
[Change] [Addition]

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: Jagruti. B. Patel.
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

2-11-99

Date

Signature Required

CR2E034 (1-1-98)