FILE NOW: FILING FEE AFTER MAY 1 IS $25.00

CORPORATION ANNUAL REPORT **1995**

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

APPROVED AND FILED
1995 MAY -1 PM 11:58
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # P94000017993 (4)

1. Corporation Name
FLORIDA EXPORTS & IMPORTS INC.

900001478269
-05/08/95--01022--017
****200.00 ****200.00

DO NOT WRITE IN THIS SPACE.

Principal Place of Business	Mailing Address
6291 THOMAS ROAD FT. MYERS FL 33912	6291 THOMAS ROAD FT. MYERS FL 33912

3. Date Incorporated or Qualified: 03/02/1994
3a. Date of Last Report: N/A

2. Principal Place of Business
21 FLORIDA Exp & Imp. INC.
Suite, Apt. #, etc.
22 1600 INDUSTRIAL DR B-9
City & State
23 FORT MYERS,
Zip 24 FL 33912 County 25 LEE

2a. Mailing Address
26
Suite, Apt. #, etc
27
City & State
28
Zip 29 County 30

4. FEI Number: 65-054-3646 ☐ 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

7. This corporation has liability for intangible tax under § 199.032, Florida Statutes ☒ Yes ☐ No

9. Name and Address of Current Registered Agent	10. Name and Address of New Registered Agent
VARSHNEY, ASHOK KUMAR 6291 THOMAS ROAD FT. MYERS FL 33912	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 _____ DATE
(Signature, Typed or Printed Name of Registered Agent and Title if applicable) (If a Trust, Registered Agent's signature is required when mandated)

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12		
TITLE	D	11 TITLE	P	☐ Change ☒ Addition
NAME	VARSHNEY, MADHU	12 NAME	VARSHNEY MADHU	
STREET ADDRESS	11 D.S.I.D.C. SHEDS JHILMIL IND EST	13 STREET ADDRESS	11 D.S.I.D.C. SHEDS JHILMIL IND. EST.	
CITY ST ZIP	DELHI - 95 INDIA	14 CITY ST ZIP	DELHI - 95 INDIA	
TITLE	D	21 TITLE		☐ Change ☐ Addition
NAME	GUNJAN, GUAR	22 NAME		
STREET ADDRESS	R-78F. DIL SHAD GARDEN	23 STREET ADDRESS		
CITY ST ZIP	DELHI - 95 INDIA	24 CITY ST ZIP		
TITLE	D	31 TITLE		☐ Change ☐ Addition
NAME	VARSHNEY, VISHAL	32 NAME		
STREET ADDRESS	R-78F. DIL SHAD GARDEN	33 STREET ADDRESS		
CITY ST ZIP	DELHI - 95 INDIA	34 CITY ST ZIP		
TITLE	D	41 TITLE	S VP	☐ Change ☒ Addition
NAME	VARSHNEY, ASHOK KUMAR	42 NAME	VARSHNEY ASHOK KUMAR	
STREET ADDRESS	6291 THOMAS ROAD	43 STREET ADDRESS	6291 THOMAS Rd.	
CITY ST ZIP	FT. MYERS FL 33912	44 CITY ST ZIP	FORT MYERS, FL 33912	
TITLE		51 TITLE	TRES	☐ Change ☐ Addition
NAME		52 NAME	5-1-95	
STREET ADDRESS		53 STREET ADDRESS		
CITY ST ZIP		54 CITY ST ZIP		
TITLE		61 TITLE		☐ Change ☐ Addition
NAME		62 NAME		
STREET ADDRESS		63 STREET ADDRESS		
CITY ST ZIP		64 CITY ST ZIP		

14. I do hereby certify that the information supplied with this filing 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 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: A Varshney ASHOK KUMAR VARSHNEY 4-24-95 813-267-8300
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #

0322511 CP