

FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

PROFIT CORPORATION ANNUAL REPORT 1996



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

DOCUMENT # P94000021889 (8)

1. Corporation Name
RITI, INC.



Principal Place of Business: 2725 N. PINE HILLS RD. ORLANDO FL 32808 US
Mailing Address: 2725 N. PINE HILLS RD. ORLANDO FL 32808 US

3. Date Incorporated or Qualified: 03/22/1994
3a. Date of Last Report: 05/01/1995
4. FEI Number: 59-3231536 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

2. Principal Place of Business: 21
2a. Mailing Address: 26
22. Suite, Apt. #, etc.: 27
23. City & State: 28
24. Zip: 25 Country: 29 30

9. Name and Address of Current Registered Agent
**YOGESH, PATEL
2725 N. PINE HILLS RD.
SUITE #103
ORLANDO FL 32808**

10. Name and Address of New Registered Agent
81 Name: **MULKA PATEL**
82 Street Address (P.O. Box Number is Not Acceptable):
83 **2725 N. PINE HILLS RD**
84 City: **ORLANDO** FL 85 Zip Code: **32808**

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: *Mulka Patel* DATE: 01/19/96

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	DPST	1.1 TITLE	DELETE
NAME	PATEL, YOGESH	1.2 NAME	DELETE
STREET ADDRESS	2725 N. PINE HILLS RD.	1.3 STREET ADDRESS	DELETE
CITY-ST-ZIP	ORLANDO FL	1.4 CITY-ST-ZIP	DELETE
TITLE	DV	2.1 TITLE	DPVST <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	PATEL, BHARAT	2.2 NAME	PATEL BHARAT
STREET ADDRESS	140 CLOVE RD	2.3 STREET ADDRESS	140 CLOVE RD
CITY-ST-ZIP	LITTLE FALLS NJ 07424	2.4 CITY-ST-ZIP	LITTLE FALLS NJ 07424
TITLE	<input type="checkbox"/> DELETE	3.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		3.2 NAME	
STREET ADDRESS		3.3 STREET ADDRESS	
CITY-ST-ZIP		3.4 CITY-ST-ZIP	
TITLE	<input type="checkbox"/> DELETE	4.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		4.2 NAME	
STREET ADDRESS		4.3 STREET ADDRESS	
CITY-ST-ZIP		4.4 CITY-ST-ZIP	
TITLE	<input type="checkbox"/> DELETE	5.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		5.2 NAME	
STREET ADDRESS		5.3 STREET ADDRESS	
CITY-ST-ZIP		5.4 CITY-ST-ZIP	
TITLE	<input type="checkbox"/> DELETE	6.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		6.2 NAME	
STREET ADDRESS		6.3 STREET ADDRESS	
CITY-ST-ZIP		6.4 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)(k), 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: *Mulka Patel* DATE: 01/19/96

CR2E034 (12/95)

