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

PROFIT CORPORATION **ANNUAL REPORT**

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P94000024779 (8)

SARMAT INVESTMENT CORPORATION

FILED Feb 18 1998 8:00am Secretary of State



Principal Place of Business Mailing Address								
1308 N. KROME AVE. 19723 SW 119TH COURT								
HOMESTEAD FL 33030 MIAMI FL 33177						DO NOT WRITE IN THIS SPACE		
U\$						3. Date incorporated or Qualified	, III THIS OF ACE	
						03/29/1994		
2. Principal Place of Business 2a. Mailing Address						4. FEI Number	- · · · · · · · · · · · · · · · · · · ·	Applied For
21		26	26			65-0475911		Not Applicable
Sulte, Apt.	#, etc.	Suite, Apt. #, etc.				5. Certificate of Status Desired	□ \$8.	75 Additional
22		27				5. Certificate of Status Desired	Fe	e Required
City & State	9	City & State				6. Election Campaign Financing		.00 May Be
23						Trust Fund Contribution		ded to Fees
— ^{Zip}	 			Country		This corporation owes or has particular to the second	(man)	ar Intangible No
24	9. Name and Address of Curren	29	30]			Personal Property Tax due June 10. Name and Address of New Re		(2) NO
					Name			
MATURA, HIMENDRA C								
19723 SW 119TH COURT MIAMI FL 33177				82	Street Addres	Address (P.O. Box Number is Not Acceptable)		
TAILY	AMITE 33177			83				
				84	City		FL 85	Zip Code
11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, t					-named corpo	ration submits this statement for the p	ourpose of chang	ing 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 registere agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.								
SIGNATURE	Signature, typed or printed name of registered age	int and title if applicable. (NO	TE: Regislere	d Ager	ıl signalura requirec		DATE	
12.	OFFICERS AND		13.			ADDITIONS/CHANGES TO OFFICE		
TITLE	PD	☐ DELETE	1.1 Ti				L. Cha	inge L. Addition
NAME	MATURA, HIMENDRA C		1.2 N					
STREET ADDRESS	19723 SW 119TH COURT				address			j·
CITY-ST-ZIP			1.4 C	ITY-ST	-ZIP		☐ Cha	nge Addition
TITLE	VD							inge Accilion
NAME	MATURA, SAVITRI		2.2 NAME 2.3 STREET ADD		ADDDCCC			İ
STREET ADDRESS	19723 SW 119TH COURT MIAMI FL 33177							[
CITY-ST-ZIP TITLE	MIAMI FL 33177	DELETE	2. 4 CITY-ST-ZIP 3.1 TITLE		1-219		Cha	nge Addition
NAME	L. Dettile			3.2 NAME		•		
STREET ADDRESS	ADDRESS		3.3 STREET ADDRESS		ADDRESS			Ī
CITY-ST-ZIP	1			ity-\$				
TITLE		DELETE	4.1 TITLE				☐ Cha	nge 🔲 Addition
NAME			4. 2 N	AME				
STREET ADDRESS			4.3 S	TREET	address			
CITY-ST-ZIP			4.4 C	ITY-ST	- ZIP			
TIFLE		DELETÉ	5.1 TITLE				Cha	nge 🔲 Addition
NAME			5.2 N	AME				
STREET ADDRESS			5.3 S	TREET	address			
CITY-ST-ZIP			5.4 C	ITY-ST	- ŽIP			
TITLE		☐ DELETE	6.1 TI	TLE			☐ Cha	nge 🔲 Addition
NAME			6.2 N	AME				
STREET ADDRESS			6.3 S	TREET	ADDRESS			
CITY-ST-ZIP				ITY-ST				
44 I barobur	artifuthat the information cumplied with	ith this filing door not qualify.	for the evi	omnt	ion etated in S	ection 119 07/3\(ii) Florida Statutes I	turther certify the	the information I

Interest certus that the imprimation supplied with this being does not quality for the exemption stated in Section 119.07(3/0), Florida Statutes. Further certus that fam an 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 eath; 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.

2.11.98 305-148-5200