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 # P9400035674 (8)

SNEHANI INC.

FILED
Jan 23 1998 8:00am
Secretary of State

Principal Plac	e of Business	Mailing Address			-	48 7 0 0110 01111 1001 0101 1001
3635 BEACH DRIVE SE 3635 BEACH DRIVE SE						
ST PETERSBURG FL 33705 ST PETERSBURG FL 33705			1705			
					DO NOT WRITE IN THIS SPACE	
					3. Date Incorporated or Qualified	
2. Principal P	lace of Business	2a. Mailing Address			05/09/1994 4. FEI Number	Applied For
21 26					59-3233980	Not Applicable
Suite, Apt. #, etc. Suite, Apt. #, etc.						\$8.75 Additional
27					5. Certificate of Status Desired	Fee Required
City & State City & State					6. Election Campaign Financing	\$5.00 May Be
23 28			T		Trust Fund Contribution	Added to Fees
Zip			Country		8. This corporation owes or has paid the o	- · - · ·
24	9. Name and Address of Currer	29	30		Personal Property Tax due June 30. 10. Name and Address of New Registers	Yes No
						od Agent
PATEL, INDIVAYADAN						
ST PETERSBURG FL 33705				Street Address (P.O. Box Number is Not Acceptable)		
\						
			84	City	F	85 Zip Code
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 Statute's.						
SIGNATURE Signalure, typod or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE						
12.	OFFICERS AN		13.		ADDITIONS/CHANGES TO OFFICERS A	ND DIRECTORS IN 12
TITLE	P	DELETE	1.1 TITLE	PR	ESIDENIT	Change Addition
NAME	PATEL, INDSVADEN		1.2 NAME	PA	TEL INDRAVADAN 35, BEACH DR.SE.	
STREET ADDRESS	3635 BEACH DR. S.E.		1.3 STREET A	DDRESS 36 .3	32' BE HCH DK ZE.	
CITY-ST-ZIP	ST. PETERSBURG FL 33705		1.4 CITY-ST-	ZIP ST.	PETERSBURG, Fl. 3370 CE PRESIDENT	· <u>5</u> .
TITLE	VP	☐ DELETE	2.1 TITLE			Change Addition
NAME	PATEL, NITA		2.2 NAME	PA	TEL NITA	
STREET ADDRESS	3635 BEACH DR. S.E.		2.3 STREET AL	DDRESS 36	35, BEACH DR. SE.,	
CITY-ST-ZIP	ST. PETERSBURG FL 33705	DELETE	2. 4 CITY - ST	ZIP S 7	SS, BEACH DR. SE., PETERSBURG, FI.	33705
TITLE		L DELETE	3.1 TITLE			☐ Change ☐ Addition
NAME OTDETT ADDRESS			3.2 NAME			
STREET ADDRESS			3.3 STREET AL			
CITY-ST-ZIP TITLE		DELETE	3.4. CITY-ST-	ZIP		Change Addition
NAME		□ nere+£	4.1 TITLE	1		☐ Change ☐ Addition
STREET ADDRESS			4. 2 NAME	approce		
			4.3 STREFT AL			
CITY-ST-ZIP TITLE		DELETE	4.4 CITY - ST -	ZIP		Change Addition
NAME		_ beent	5.1 THEE 5.2 NAME		J.	, La criango La Auditroli
STREET ADDRESS			5.3 STREET AL	ODRESS		1//22
CITY-ST-ZIP			5.4 CITY-ST-		_//) / 😅
TITLE		DELETE	6.1 TITLE	£.11		Change Addition
NAME			6.2 NAME		1000024098	51
STREET ADDRESS			63 STREET AC	DRESS	1000024098 -01/23/98010120 ***150.00	120
CITY-ST-ZIP			64 CITY-ST-		***150.80	
de liberales	- 414 - 44 - 4 41 - 1 - 4		-			

4. 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 logal 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.

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1st Part

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