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

PROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA **DE**PARTMENT OF **STATE** 

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P9400054653 (8)

## FILED Apr 17 1998 8:00am Secretary of State

	INVESTMENTS, INC.									
Principal Plac		Mailing Address								
<b>2701 S.W. 137 AVE.</b> 2701 S.W. 137 AVE. MIAMI FL 33175 MIAMI FL 33175							DO NOT WID	TC (N. T. 110	PDACE	
					-	3 Data I	DO NOT WRI ncorporated or Qualified		SPACE	-
-							14/1994	,		
2. Principal P	lace of Business	2a. Mailing Address				4. FEI Nu		<del></del>	- I Ar	oplied For
21 26						65	-0527680		— <del>— —</del>	ot Applicable
Suite, Apt.	#, etc.	Suite, Apt. #, etc.	<del></del>				cate of Status Desired		\$8.75 Fee Re	Additional equired
City & State City & State						8. Electic	on Campaign Financing		\$5.00	May Be
28							Fund Contribution			to Fees
Zip							orporation owes or has		_ ′ -	
24	25 29 30 30 9. Name and Address of Current Registered Agent						nal Property Tax due Ju			No
-		r negistered Agent	В	1 Name		10. Name	and Address of New I	registered	Agent	
PATEL, ISHWER										
15121 S.W. 42 TERRACE				2 Street	Addres	s (P.O. Box	x Number is Not Accept	able)		
MIAMI FL 33185				3						
			84	4 City				FL	<b>85</b> Zip	Code
11. Pursuant	to the provisions of Sections 607.050 egistered agent, or both, in the State m familiar with, and acqupt the obliga	2 and 607.1508, Florida Statute of Florida, Such change was a	s, the about	ve-named	corpor	ation subm	nits this statement for the		of changing it	ts registered
agent. I a	m familiar with, and acquet the obliga	ations of Section 607.0505, Flo	<b>.</b> .		•	•				I .
SIGNATURE	Signature, typed or printed name of registered age	- 1 au -	SHU	ER		YATE when reinstating	<u> </u>	4	30 99	3
12.	OFFICERS AND	<del> </del>	13.	gent signature	э төфолгаф		ONS/CHANGES TO OFF	ICERS AN	D DIRECTOR	RS IN 12
TITLE	Ď	☐ DELETE	1.1 TITLE		D				Change	Addition
NAME	PATEL, ISHWER P		1.2 NAME	i.	1	TEL	ISHWER		_	
STREET ADDRESS	15121 SW 42 TERRACE	21 SW 42 TERRACE 133		T ADDRESS	15	153	5.W. 436		-ANE	-
CITY-\$1-ZIP	MIAMI F		1.4 CITY-	ST-ZIP	M	IAM	1 FL. 3	3185		
TITLE	D	☐ DELETE	2.1 TITLE		P				Change	Addition
NAME	PATEL, PRAFULLA		2.2 NAME			TEL	- PRAFULI	_A		ļ
STREET ADDRESS	15121 SW 42 TERRACE		2.3 STRE		_	153	5.W. 4		-HMC	,
CITY-ST-ZIP			2.4 CITY		M	IAMI	FL-33	185		
TITLE	D	DELETE	3.1 TITLE		3	7EL	BIMAL		Change	Addition
NAME	PATEL, BIMAL		3.2 NAME			53	5.W. 45	ADD	LANG	<b>.</b>
STREET ADDRESS	15121 SW 42 TERRACE			T ADDRESS			_	3318	•	
CITY-ST-ZIP TITLE	MIAMI F	☐ DELETE	3.4. CITY 4.1 TITLE	- ST - ZIP	- 17	11AM	11 FL	2215	☐ Change	☐ Addition
NAME			4. 2 NAM						C) Change	
STREET ADDRESS				T ADDRESS						
CITY-ST-ZIP			4.4 CITY-							i
TITLE	<del></del>	DELETE	5.1 TITLE						Change	Addition
NAME			5.2 NAME						<del>-</del> '	
STREET ADDRESS				T ADDRESS						ļ
CITY-ST-ZIP			5.4 CITY							}
TITLE		DELETE	6.1 TITLE					"	Change	Addition
NAME			6.2 NAME	j	1					
STREET ADDRESS			6.3 STREE	T ADDRESS						
CITY-ST-ZIP			6.4 CITY		L					
	ertify that the information supplied wi	th this filma doce not avalify fo	r the event	ntion state	ed in So	ction 110 f	)7(3)(i) Florida Statutes	Lituribario	artifu that the	information

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 legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustate 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.

CIGNATURE.

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