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

Mailing Address

2160 HOWLAND BLVD.

PROFIT CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

## **Katherine Harris**

Secretary of State
DIVISION OF CORPORATIONS

## DOCUMENT # P9400058409

. Corporation Name

Principal Place of Business

2160 HOWLAND BLVD.

MAHESH ENTERPRISES, INC.

## #114 DO NOT WRITE IN THIS SPACE **DELTONA FL 32738 DELTONA FL 32738** 3. Date Incorporated or Qualifed US US 08/08/1994 Applied For 4. FEI Number 2. Principal Place of Business 2a. Mailing Address 59-3259511 Not Applicable 26 21 \$8.75 Additional Suite, Apt. #, etc. Suite, Apt. #, etc. 5. Certifcate of Status Desired П Fee Required 27 22 City & State City & State \$5.00 May Be 6. Election Campaign Financing Added to Fees Trust Fund Contribution 28 23 Zip Country Zip Country 8. This corporation owes the current year Intangible Personal Property Tax. 25 30 24 10. Name and Address of New Registered Agent 9. Name and Address of Current Registered Agent PATEL, MAHESH K Street Address (P.O. Box Number is Not Acceptable) 2160 HOWLAND BLVD. **DELTONA FL 32738** 83 85 Zip Code 84 City 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 of corporation of the purpose of changing its registered of corporation of the purpose of changing its registered of the corporation of the purpose of changing its registered of the purpos Signature, typed or printed name of registered agent and title if applicable ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 OFFICERS AND DIRECTORS 13. 12. □ DELETE 1.1 TITLE TITLE PATEL, MAHESH 1.2 NAME NAME 2160 HOWLAND BLVD 1.3 STREET ADDRESS STREET ADDRESS **DELTONA FL 32738** 1.4 CITY-ST-ZIP CITY-ST-ZIP ☐ Change ☐ Addition ☐ DELETE 2.1 TITLE DVP TITLE 2.2 NAME PATEL, JAGOISH NAME 2160 HOWLAND BLVD. 2.3 STREET ADDRESS DELTONA FL 32738 2. 4 CITY-ST-ZIP CITY-ST-ZIP ☐ DELETE ☐ Change ☐ Addition 31 TM F PATEL, KANUBHAI 3.2 NAME NAME AND 2160 HOWLAND BLVD. 3.3 STREET ADDRESS STREET ADDRESS **DELTONA FL 32738** 3.4. CITY-ST-ZIP CITY-ST-ZIP ☐ Change : ☐ Addition □ DELETE 4.1 TITLE TITLE PATEL, KINA 4.2 NAME NAME 2160 HOWLAND BLVD. 4.3 STREET ADDRESS STREET ADDRESS **DELTONA FL 32738** CITY-ST-ZIP 4.4 CITY-ST-ZIP ☐ Change ☐ Addition ☐ DELETE 51 TITLE TITLE 5.2 NAME NAME 5.3 STREET ADDRESS STREET ADDRESS 5.4 City-St-ZIP CITY-ST-ZIP 6.1 TITLE ☐ Change ☐ Addition ☐ DELETE TILE 6.2 NAME NAME

14. 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 trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 12 of Block 13 if changed, or on an attachment with an address, with all other like empowered.

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

SIGNATURE

STREET ADDRESS

MSKYGTTURE REQUIRED
NATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

1-15-99

**FILED** 

Feb 08, 1999 8:00am

**Secretary of State** 

02-08-1999 90010 020 \*\*\*150.00

407-574-138

Daytime Phone #

CR2E034 (11/98)