## FILE NOW: FILING FEE AFTER MAY 1 IS \$59

PROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMEN F STATE

Sandra B. Mo

Secretary of S DIVISION OF CORPO ATIONS

DOCUMENT # **P94000067089**1. Corporation Name

BHAVIK, INC.

## **FILED** Apr 04 1997 8:00am Secretary of State

Principal Place of Business 3818 N EAST 7ST ST OCALA FL 34470	Mailing Address 3818 N EAST 7ST ST OCALA FL 34470			
			3. Date Incorporated or Qualifie 09/13/1994	3a. Date of Last Report 04/24/1996
2. Principal Place of Business	2a. Mailing Address		4. FEI Number	Applied For
21	26		59-3268344	Not Applicable
Suite Apt. # etc.	Suite, Apt. #, etc.		5. Certificate of Status Desired	\$8.75 Additional Fee Required
City & State	City & State		6. Election Campaign Financing	
23	28		Trust Fund Contribution	Added to Fees
Zip Country	Zip	Country		for intangible tax under s. 199.032,
24   25	29	30	Florida Statutes	YesNo
9. Name and Address of Curr	ent Hegistered Agent	81 Name	10. Name and Address of New	uafistelen Wäsut
Patel, ramanbhai 3818 n East 7th St.				***************************************
SUITE 207		82 Street	Address (P.O. Box Number is Not Accep	otable)
OCALA FL 34470		83		
00,20,00		24 64		log I Zio Oodo
		84 Crty		FL 85 Zip Code
SIGNATURE Signature Typed or printed name of registered 12. OF FIGERS A	agent and tille it applicable (NC	DTE Registered Agent signatur	· · · · · · · · · · · · · · · · · · ·	DATE FFICERS AND DIRECTORS IN 12
THEE DPS	DELETE	1,1 TITLE		Change Addition
NAME PATEL, RAMANBHAI B		1.2 NAME	]	
STREET ADDRESS 3826 NE 7TH ST		1.3 STREET ADDRESS		
CITY-S1-7P OCALA FL 34470	····	1.4 CITY-ST-ZIP		
TITLE DVT	☐ DELETE	2.1 TITLE	1	Change
NAME PATEL, BHARTIBEN R STREET ADDRESS 3826 NE 7TH ST		2.2 NAME		
STREET ADDRESS   3826 NE / IFT ST CITY-ST-ZIP   OCALA FL 34470		2.3 STREET ADDRESS 2. 4 City-St-Zip		
TITLE	DELETE	31 TITLE		Change Addition
NAME		3.2 NAME		
STREET ADDRESS		3.3 STREET ADORESS		
CITY - ST- ZIP		3 4. CITY-ST-ZIP		
THE	☐ DELETE	4.1 TITLE		Change Addition
NAME		4 2 NAME		
STREET ADDRESS		4 3 STREET ADDRESS		
CHY-SI-7#	DELETE	4.4 CITY - \$T - ZIP		Change Addition
TITLE	☐ DETEIR	5.1 TITLE		C) Change (C) Abbillion
NAME STREET ADDRESS		5.2 NAME 5.3 STREET ADDRESS		
STREET ACORESS  CITY - ST - ZIP		5.3 STREET ADDRESS		
TITLE	DELETE	6.1 TITLE		Change Addition
NAME	the second secon	6.2 NAME		
STREET ADDRESS		6.3 STREET ADDRESS	Į	
CITY ST-ZIP		64 CITY-SY-ZIP		
14. Lido hereby certify that the information suppl	lied with this filing does not gue		stated in Section 119.07(3)(i), Florida Sta	tutes. I further certify that the

The indexest canny that the anomalour supplies with this tilling does not quality for the exemption stated in Section 119.07(3)(f), 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.

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