FILED Apr 30, 1999 8:00 am Secretary of State

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**PROFIT CORPORATION** ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

## Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

## DOCUMENT # P9400072640

PRAGATI INVESTMENTS, INC.

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Principal Place of Business Mailing Address									t 1881/1881 tim 18/11 Gibil matti anti anti anti anti	Tata traca ater	re deliter dibre idibi
1001 1111 0 0 1			561 NW 9 ST LANTATION FL 33317				TO A STATE OF THE DO NOT WRITE IN THIS SPACE				
							.		Date Incorporated or Qualifed 10/04/1994		
2 Denoinal Di	ace of Business	2a	Mailing Address	-					El Number	TA	pplied For
2. FIIIGIPALFI 21	ace or business	26	. ,				}	. 6	65-0523412	N	lot Applicable
Suite, Apt. #, etc.			Suite, Apt. #, etc.						Certificate of Status Desired	<b>.</b>	Additional
22								<b>5.</b> C	Dertificate of Status Desired		Required
City & State			City & State				}		Election Campaign Financing		May Be
23	<u></u>	28							rust Fund Contribution		to Fees
Zip	Country	-	Zip	Cou	ntry				This corporation owes the current year Int Personal Property Tax.	angible X Yes	□No
24	9. Name and Address of Curre	nt Pegis	tored Agent	30					Name and Address of New Registered		
	9. Name and Address of Corre	iit Kegis			81	Name			GANPAT		
MANCINO, CHRIS						04			D. Box Number is Not Acceptable)		·
1215 SE 2ND AVE					82	Street	Address	リク	S. FEDERAL HIGHWA	γ .	
SUIT	E 102			į	83		<del>i -7</del>				•
FT LAUDERDALE FL 33316					84	04.				85 Zip	Code
,					, ,	City	FOR	۲ (	LAUDERDALE FL	.   3	3316
11. Pursuant	to the provisions of Sections 607.05	02 and 6	07.1508, Florida Statu	tes, the a	bove	-named	corpora	tion s	submits this statement for the purpose of	changing it	ts registered
office or re agent. I a	egistered agent, or both, in the State m familiar with, and accept the oblig	of Floridations of,	a. Such change was a Section 607.0505, Fk	autnonzeo orida Stati	utes	ine corp	orations	s DOA	ard of directors. I hereby accept the appoint	itilient as i	egioteroa .
SIGNATURE	25h							_			
SIGNATORE	Signature, typed or printed name of registered ag			E: Registered	Agen	t signature r	required wh			D DIDECT	ODC IV 12
12.	OFFICERS A	ND DIRE	CTORS DELETE	13.	<del></del> -	·		AL	DDITIONS/CHANGES TO OFFICERS AN	DIRECT ⊠ Change	
TITLE	ST SUBSET		☐ DELETE	1.1 TIT			44	ارىم	KAR	<u>ja</u> onange	
NAME	THACKER, BHARAT			1.2 N		ADDRESS	1 77	, 0	<b>~</b>		
STREET ADDRESS	7561 NW 9 ST			1.4 CF							
CITY-ST-ZIP	PLANTATION FL 33317  DP		☐ DELETE	2.1 TII	_	1-217		_		Change	Addition
TITLE	PATEL, GANPAT		<u></u>	2.2 N			Ì			, ,	Ì
NAME STREET ADDRESS	7561 NW 9 ST			- 1		ADDRESS	/3/	7	S FEDERAL MIGHWA	4 Y	
CITY-ST-ZIP	PLANTATION FL 33317			2.4 C			_		LAUDERDALE, FL 33.		
TITLE	TEANTAMONTE GOOT	<del></del> _	☐ DELETE	3.1 TI						☐ Change	Addition
NAME				3.2 N	AME						{
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CITY-ST-ZIP				3.4. C	ITY-S	T-ZIP					
TIRLE			☐ DELETE	4.1 TI	TLE					Change	e ☐ Addition
NAME				4. 2 N	AME						
STREET ADDRESS				4.3 \$7	REE	ADDRESS					ļ
CITY-ST-ZIP	<u>`</u>			4.4 CI		T-ZIP	ļ		<u> </u>		Addition
TITLE			☐ DELETE	5.1 Tř						☐ Change	e 🔲 Addition
NAME				5.2 N							ĺ
STREET ADDRESS						T ADDRESS	1				
CITY-ST-ZIP		· · · · · · · · · · · · · · · · · · ·	DELETE	5.4 CI 6.1 TI	_	T-ZIP	<del> </del>			☐ Change	Addition
TITLE				6.2 N						5/1d-190	
NAME	,			0.2 N/	-vnC		1				

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 suppliemental 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, with all other like empowered.

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

STREET ADDRESS

CITY-ST-ZIP