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Mailing Address

PROFIT CORPORATION ANNUAL REPORT

1997

Principal Place of Business



ELORIDA DEPARTMENT DE STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P94000085530 (1)

BHOJWANI ON THE BEACH, INC.

C/O SLPASH C/O SLPASH 345 LINCOLN RD 345 LINCOLN RD MIAMI BEACH FL 33139-3102 MIAMI BEACH FL 33139 3. Date Incorporated or Qualified 3a, Date of Last Report 11/22/1994 05/01/1996 2. Principal Place of Business 2a, Mailing Address 4. FEI Number Applied For 65-0535809 Not Applicable 21 26 Suite, Apt #, etc. Suite, Apt #, etc. \$8.75 Additional B. Certificate of Status Desired Fee Required 27 22 City & State City & State 6. Election Campaign Financing \$5.00 May Be 23 28 Trust Fund Contribution Added to Fees Zip Country Zip Country This corporation has liability for intangible tax under s. 199.032, Yes No 30 24 25 29 Florida Statutes 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent 81 Name KTG&S REGISTERED AGENT CORPORATION 1401 BRICKELL AVE Street Address (P.O. Box Number is Not Acceptable) SUITE 700 **MIAMI FL 33131** 83 City Zip Code 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 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 Statutes. SIGNATURE Signature, Typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 96/6) 12. 13. DELETE 1.1 TITLE Change Addition THLE NAME BHOJWANI, KOMAL 1.2 NAME R2E034 345 LINCOLN RD 1.3 STREET ADDRESS STREET ADDRESS MIAMI BEACH FL 33139 1.4 CITY-ST-ZIF CITY-ST-2IP DELETE Change Addition TITLE 2.1 TITLE BHOJWANI, JAIDEEP R 2.2 NAME 345 LINCOLN RD STREET ADDRESS 2.3 STREET ADDRESS MIAMI BEACH FL 33139 2 4 CITY-ST-ZIP CITY-ST-ZIP DELETE Change Addition UILE 31 TITLE 3.2 NAME NAME 3.3 STREET ADDRESS STREET ADDRESS 3.4. CITY-ST-ZIP CHTY - ST - ZIP DELETE Change Addition 4.1 TITLE TITLE 4. 2 NAME NAMO 4.3 STREET ADDRESS STREET ADDRESS 4.4 CITY-ST-ZIP CITY-ST-ZIP ☐ DELETE Change Addition 5.1 TITLE DILE NAME 52 NAME STREET ADORESS **5.3 STREET ADDRESS** 5.4 CITY - ST-ZIP CITY - ST - ZIP DELETE Change Addition THILE 6.1 TITLE

6.2 NAME

14. I do 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

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

SIGNATURE:

NAME

STREET ADDRESS

CITY - ST - ZIF

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.

FILED

May 19 1997 8:00am

Secretary of State

0189491