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

PROFIT CORPORATION ANNUAL REPORT 1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State

DIVISION OF CORPORATIONS

DOCUMENT # P94000091794 (5)

D.K. CONSULTANCY SERVICES, INC.

FILED Apr 22 1998 8:00am Secretary of State



Principal Place of Business		Mailing Address		
11 EAST BELL ROAD #227 PHOENIX AZ 85022		1244 N. UNIVERSITY DR. PLANTATION FL 33322		DO NOT WRITE IN THIS SPACE
				3. Date Incorporated or Qualified
				01/03/1995
2. Principal Place of Business		2a. Mailing Address		4. FEI Number Applied For
21		26		65-0542027 Not Applicable
Suite, Apt. #, etc.		Suite, Apt. #, etc.		5. Certificate of Status Desired \$8.75 Additional
22		27		Fee Required
City & State		City & State		6. Election Campaign Financing \$5.00 May Be
23		28		Trust Fund Contribution Added to Fees
Zip	Country	Zip	Country	8. This corporation owes or has paid the current year Intangible
24	25	29	30	Personal Property Tax due June 30. Yes XVo
	9. Name and Address of Curren	t Registered Agent	84 4	10. Name and Address of New Registered Agent
	rit z , laureen s		81 Na	Puritz Lauren S.
124	4 N. UNIVERSITY DR.		82 Str	reet Address (P.O. Box Number is Not Acceptable)
PLANTATION FL 33022				
			83	
j k			B4 Cit	ty FL 85 Zip Code
44 Discount	to the are delegated of Specials 607.050	2 and CO7 1609 Elorida Status	loc the above nan	
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 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) DATE				
12.	OFFICERS ANI	D DIRECTORS	13.	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12
TITLE	P	☐ DELETE	1.1 TITLE	Change Addition
NAME	Karandikar, Dilip a		1.2 NAME	
STREET ADDRESS	#1 EAST BELL ROAD #227		1.3 STREET ADDRI	RESS
CITY-ST-ZIP	PHOENIX AZ 85022		1.4 CHTY - ST - ZIP	
TITLE		DELETE	2.1 TITLE	. Change Addition
NAME			2.2 NAME	
STREET ADDRESS	*		2.3 STREET ADDR	RESS
CITY-ST-ZIP			2. 4 CITY - S1 - ZIP	Р
TITLE		DELETE	3 1 THILE	☐ Change ☐ Addition
NAME			3.2 NAME	
STREET ADDRESS			3.3 STREET ADDR	RESS
CITY-ST-ZIP			3.4. CITY-ST-7IP	Р
TITLE		DELETE	4.1 TITLE	☐ Change ☐ Addition
NAME			4. 2 NAME	
STREET ADDRESS			4.3 STREET ADDR	RESS
CITY-ST-ZIP			4.4 CITY - ST - ZIP	
TITLE		DELETE	5.1 TITLE	Change Addition
NAME			. 5.2 NAME	
STREET ADDRESS			5.3 STREET ADDR	RESS
CITY-ST-ZIP		4	5.4 CITY - ST - ZIP	
TITLE		DELETE	6.1 TITLE	Change Addition
NAME			6.2 NAME	
STREET ADDRESS			6.3 STREET ADDR	RESS
			6.4 CITY-ST-ZIP	
CITY-ST-ZIP	Me at a second and a	20 0 2 00		stated in Section 119 07/3/ii). Florida Statutes, I further certify that the information

4. I hereby certify that the information supplied with this filling does not qualify for the exemption stated in Section 119.07(3)(i). Florida Statutes. I further certify that the informatio indicated on this annual report or supplemental ennual 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 entachment with an address.

Harandihan

nulistas 602-862-1293