

FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

PROFIT
CORPORATION
ANNUAL REPORT

1996



FLORIDA DEPARTMENT OF STATE
Sandra B. Martham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P95000002537 (5)

1. Corporation Name

RAVI CORPORATION

Principal Place of Business

101 HIGHWAY 17-SOUTH
ELDORADO, FL 33680

5614 S. MANHATTEN AVE
TAMPA, FL 33616

Mailing Address

101 HIGHWAY 17-SOUTH
ELDORADO, FL 33680

2. Principal Place of Business

21 5614 S. manhattan ave
Suite, Apt. #, etc.

2a. Mailing Address

26 5614 S. MANHATTEN AVE
Suite, Apt. #, etc.

27 City & State

28 TAMPA, FL

29 Zip

30 Hillsborough

22 City & State

23 Tampa

24 33616

9. Name and Address of Current Registered Agent

PATEL, SHAILESH C

101 HIGHWAY 17-SOUTH
ELDORADO, FL 33680

5614 S. manhattan ave
Tampa, FL 33616

3. Date Incorporated or Qualified
01/09/1995

3a. Date of Last Report

4. FEI Number

59-3288174

Applied For

Not Applicable

5. Certificate of Status Desired

\$8.75 Additional
Fee Required

6. Election Campaign Financing
Trust Fund Contribution

\$5.00 May Be
Added to Fees

8. This corporation has liability for intangible tax under s. 199.032,
Florida Statutes Yes No

10. Name and Address of New Registered Agent

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)

83

84 City

FL 85 Zip Code

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: **Shailesh Patel SHAILESH PATEL President**

1-22-96

NOTE: Registered Agent signature required when renewing.

DATE

12. OFFICERS AND DIRECTORS		13.	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	NAME	1.1 TITLE	<input type="checkbox"/> Change	<input type="checkbox"/> Addition
NAME	STREET ADDRESS	1.2 NAME		
CITY-ST-ZIP		1.3 STREET ADDRESS		
TITLE	NAME	1.4 CITY-ST-ZIP		
NAME	STREET ADDRESS			
CITY-ST-ZIP				
TITLE	NAME	2.1 TITLE	<input type="checkbox"/> Change	<input type="checkbox"/> Addition
NAME	STREET ADDRESS	2.2 NAME		
CITY-ST-ZIP		2.3 STREET ADDRESS		
TITLE	NAME	2.4 CITY-ST-ZIP		
NAME	STREET ADDRESS			
CITY-ST-ZIP				
TITLE	NAME	3.1 TITLE	<input type="checkbox"/> Change	<input type="checkbox"/> Addition
NAME	STREET ADDRESS	3.2 NAME		
CITY-ST-ZIP		3.3 STREET ADDRESS		
TITLE	NAME	3.4 CITY-ST-ZIP		
NAME	STREET ADDRESS			
CITY-ST-ZIP				
TITLE	NAME	4.1 TITLE	<input type="checkbox"/> Change	<input type="checkbox"/> Addition
NAME	STREET ADDRESS	4.2 NAME		
CITY-ST-ZIP		4.3 STREET ADDRESS		
TITLE	NAME	4.4 CITY-ST-ZIP		
NAME	STREET ADDRESS			
CITY-ST-ZIP				
TITLE	NAME	5.1 TITLE	<input type="checkbox"/> Change	<input type="checkbox"/> Addition
NAME	STREET ADDRESS	5.2 NAME		
CITY-ST-ZIP		5.3 STREET ADDRESS		
TITLE	NAME	5.4 CITY-ST-ZIP		
NAME	STREET ADDRESS			
CITY-ST-ZIP				
TITLE	NAME	6.1 TITLE	<input type="checkbox"/> Change	<input type="checkbox"/> Addition
NAME	STREET ADDRESS	6.2 NAME		
CITY-ST-ZIP		6.3 STREET ADDRESS		
TITLE	NAME	6.4 CITY-ST-ZIP		
NAME	STREET ADDRESS			
CITY-ST-ZIP				

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), 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.

SIGNATURE: **Shailesh Patel SHAILESH PATEL**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

1-22-96 813-835-8523

Daytona Beach

CR2E034 (12/95)