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

CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P95000002997 (1)

SHAYONA CORPORATION

FILED Feb 03 1998 8:00am Secretary of State



Principal Place of Business Mailing Address									- I SELITAET DIE TUIST BILL BURL BURL BURL	30 111 00 110 14010 10110 11	IIII IBRI IBRI	
VERIEA EAST SHELL FOODMART 2159 ROYA 8020 N WICKHMAN RD MELBOURN VERIA FL 32910					YAL POINCIANA BOULEVARD RNE FL 32835				DO NOT WRITE IN THIS SPACE			
US									3. Date Incorporated or Qualified			
2.	Principal P	Place of Busine	SS	2a, Mailing Address					01/09/1995 4. FEI Number	TΔι	oplied For	
21				26				59-3301712	Not Applicable			
=-,1	Suite, Apt. #, etc.			Suite, Apt. #, etc.						Additional		
22				27				5. Certificate of Status Desired	•	equired		
	City & Stat	6		City & State				6. Election Campaign Financing	\$5.00	Мау Ве		
23		28							Trust Fund Contribution	Added	to Fees	
_	Zip		Country	Zip Country				8. This corporation owes or has paid				
24	25 25			29 30				Personal Property Tax due June 30. Yes No 10. Name and Address of New Registered Agent				
9, Name and Address of Current Registered Agent							Name		10. Hame and Address of New Regis	stered Agent		
PATEL, NIRANJAN S												
2159 ROYAL POINCIANA BOULEVARD MELBOURNE FL 32935						82 Street Addre			ss (P.O. Box Number is Not Acceptable)	!		
	ME	ELDOUNINE P	L 32933			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 607.0506, Florida Statutes.												
SIG	GNATURE											
		Signature, typed or	printed name of registered agnor			d Age	nt signatu	re required		DATE DIPLOTOR	20.01.40	
12				DELETE	13.				ADDITIONS/CHANGES TO OFFICER	Change	Addition	
NAF		_	IRANJAN S			1.2 NAME				Onlinge	L Roomon	
			YAL POINCIANA BOU				1.3 STREET ADDRESS					
			RNE FL 32935	CLIMID								
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	EET ADDRESS				ı		ADDRESS					
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STR	EET ADDRESS						ADDRESS					
	Y-ST-ZIP	action that the	oformation associated and	thin films done not some		IY-\$1		nd in C	notion 440 07/9V9. Claside Clay and 17	those nowith sale as an	information.	
14. Thereby 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 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.												