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

PROFIT CORPORATION ANNUAL REPORT

1997

SIGNATURE:



FLORIDA DEPARTMENT OF STATE

FILED

Apr 10 1997 8:00am

Secretary of State

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P95000013322 (9)

LALJI, INC. OF CENTRAL FLORIDA

Principal Place of Business			Mailing Address				
7400 SOUTHLAN ORLANDO FL 33		7400 SOUTHLAND BLVD ORLANDO FL 32809-6971	#106				
					3. Date Incorporated or Qualified 02/15/1995	3a. Date of La 03/25/199	•
2. Principal Pl	ace of Business	2a. Mailing Address			4. FEI Number		Applied For
21		26			59-3300939		Not Applicable
Sorte, Apt. #, etc 22		Suite, Apt. #, etc.	27		5. Certificate of Status Desired	\$8.75 Additional Fee Required	
City & State)	City & State			6. Election Campaign Financing		.00 May Be
23	Country	28 Zip	Countr		Trust Fund Contribution		Ided to Fees
7ip	25 29		30		8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes Yes No 10. Name and Address of New Registered Agent		
24	9. Name and Address of Current Registered Agent						
PATE	L, TULASHIBHAI V		81	Name	## ### ### ### ### ### #### #### ######	<u> </u>	
	SOUTHLAND BLVD., #108		82	Ctroot Add	ress (P.O. Box Number is Not Acceptab	اما	
	ANDO FL 32809		04	SIFBUL AUG	Figure 1. O. Box Number is 1400 Acceptato		
·			83				
			84	City		85	Zip Code
				" ′		FL	,
office or re agent. Lar	to the provisions of Sections 607,050 egistered agent for both, in the State m familiar with, and accept the oblig	of Florida. Such change was a	authorized h	withe corpora	poration submits this statement for the p tion's board of directors. I hereby accep	urpose of chang it the appointmen	ing its registered nt as registered
SIGNATURE	Signature, typical or printed name of registered ag	ent and tice if applicable (NOT	E Registered Ag	jent signature requ	ired when reinstating)	DATE	
12.		ID DIRECTORS	13.		ADDITIONS/CHANGES TO OFFIC		
TITLE	PD	DELETE	1.1 TITLE			Cha	ange [Addition
NAME	PATEL, TULASHIBHAI V	^^	1.2 NAME				
STREET ADDRESS	7400 SOUTHLAND BLVD., #16	V8		T ADDRESS			
CHY-ST-Zif*	ORLANDO FL 32809	DELETE	1.4 CITY -	ST-ZIP		. □ Cha	ange Addition
Till	VSD Patel, Dayabhai L	☐ pereie	2.1 TITLE			(OIR	inge Addition
NAME (MAGEL ASSOCIATION	7400 SOUTHLAND BLVD., #1	ne .	2.2 NAME	T ADDRESS			
STREET ADDRESS	ORLANDO FL 32809	00	2.3 STREE				
CHY-\$1+7≥* TH\f	ONDARDO TE GEGGS	DELETE	3.1 TITLE			. □ Cha	ange Addition
NAME	I		3.2 NAME		.	• •	
STREET AJJORESS			3.3 ST#E6	T ADDRESS			
CITY -\$1 - 76*			3.4. CITY	ST-ZIP			
TIFLE		DELETE	4.1 THTLE			Cha	ange Addition
NAME			4 2 NAM	E			
STREET ADDRESS			4.3 STREI	T ADDRESS			
CITY - ST - ZIP			44 CITY	ST-ZIP			
TOLE		L DELETE	5.1 TITLE			☐ Cha	ange Addition
NAVE			5.2 NAME				
STREET ADDRESS				T ADDRESS			
CHY+SI+7IP		DELETE	5.4 CITY-	ST-ZIP		Cha	ange Addition
TITLE		[_] vereit	6 1 TITLE			OII	mas El vocation
NAVE			6.2 NAME	1			
STREET ADDRESS			6.3 SIRE	T ADDRESS			
14. I do hereb	L by certify that the information supplie	ed with this filing does not quali	fy for the ex	emption state	ed in Section 119.07(3)(i), Florida Statute	s. I further certify	that the
informatio Lam an o	on indicated on this annual report or flicer or director of the corporation on his Bluck 12 or Block 13 if changed, i	supplemental annual report is t or the receiver or trustee empov	true and acc vered to exe	curate and the cute this repo	at my signature shall have the same lega ort as required by Chapter 607, Florida S	al effect as if mad Statutes; and that	de under oath; that t my name