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

**PROFIT CORPORATION** ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

## Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

## 1997

DOCUMENT # **P95000036948 (4)** SUBH, INC.

Principal Place of Business

Mailing Address

## **FILED** Jan 31 1997 8:00am Secretary of State



Subt. Api # clc   Subt. Api	901 N 6TH AV WAUCHULA FL	=	901 N 6TH AVE WAUCHULA FL 33873-200	16							
Solition, April 8, Circ.  Solition, April 8, Commission   Solition, Added to Present Provided Commission   Solition Commission   Solition Commission   Solition Commission   Solition Commission   Solition Commission   Added to Present Private Commission   Solition Commission   S						'				Report	
Solicy Age # city   Status   Solicy Age # city   Status   Solicy Age # city   Status   Solicy   Status   Solicy   Status   Solicy   Status   Solicy   Status   Solicy   Solicy	2. Principal Place of Business 2a. Mailing A			dress			l		A	pplied For	
City & State 22   Country   State   City & City & State   City & C							65-0583102		N	lot Applicable	
City & State    Country   28	27						5. Certificate of Status Desired		\$8.75 Additional Fee Required		
9. Name and Address of Current Registered Agent  9. Name and Address of Current Registered Agent  10. Name and Address of New Registered Agent  11. Name and Address of New Registered Agent  12. Street Address (P.O. Box Number is Not Acceptable)  13. Street Address (P.O. Box Number is Not Acceptable)  14. Pursuant to the provisions of Sections 607 05002 and 607 15004. Florids Statutes fill and a computed the appointment as registered agent, are registered agent, or both, in this State of Florids Such change was authorized by the corporation's board of directors. Thereby accept the appointment as registered agent, and the provision authority of the provision authority of the provision authority of the provision and the appointment are registered agent, and the provision are the appointment as registered agent age	City & Sta	ate	28				1 ' ' '				
PATEL, SUBHASH \$12 NORTH FLORIDA AVENUE SUITE 8 WAUCHULA FL 33873  \$2 Street Address (P.O. Box Number is Not Acceptable)  #2 Street Address (P.O. Box Number is Not Acceptable)					of This corporation has income to the street of the street					s. 199.032,	
SIZE ADDITION AVENUE SUITE 8 WAUCHULA FL 33873  82 Stroet Address (P.O. Box Number is Not Acceptable)  83 Stroet Address (P.O. Box Number is Not Acceptable)  84 City FL 85 Zip Code  85 Zip Code  86 City FL 85 Zip Code  87 City FL 85 Zip Code  88 Zip Code  89 Zip Code  80 Zip Co		9. Name and Address of Co	urrent Registered Agent				10. Name and Address of New Re	gistered A	gent		
SUITE 8 WAUCHULA FL 33873  81  City	PAT	TEL, SUBHASH		1	B1 Na	me					
The Persuent to the provisions of Sections 607.05.02 and 607.15.06. Florida Statutes, the above-named corporation submits this statement for the purpose of changing its regist office or registerer agent, or both in this State of Florida Statutes, the above-named corporation's board of directors. I hereby accept the appointment as register agent, or both in this State of Florida Statutes.  SIGNATURE  12.  OFFICERS AND DIRECTORS  13.  ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 1.  10.  PSTD  DELETE  1.1TILLE					82 Str	eet Addre	ss (P.O. Box Number is Not Acceptab	le)			
TI. 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 regist 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 registe agent, lam familiar with, and accept the obligations of, Socion 607.0505, Florida Statutes.  SIGNATURE    Signature types or predict agent a	WAI	UCHULA FL 33873		[i	83						
SIGNATURE   Signature type-of prefer from of fregishered agenet and bit of applicable   NOTE Regishered Agenet bignature reached when reinidating)   DATE	·					•		FL	1 1		
13.   ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 1   ITLE									ointment a	s registered	
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14. Edg berefy, certify that the information supplied with this filing does not qualify for the exampling stated in Section 119 07(3)(i). Florida Statutes, I further certify that the		<u> </u>								<del> </del>	

ruo nereuly ceruly man me information supplied with this mining does not quarry 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 it is 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.

Daytime Phone #