

SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER AUGUST 7, 1996.
AMOUNT DUE ON OR BEFORE 8/7/96: \$225 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$375.)

PROFIT
CORPORATION
ANNUAL REPORT
• 1996



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

DOCUMENT # P95000088215 (5)

1. Corporation Name

RAVI INCORPORATED OF VALRICO

FILED

97 JAN 24 AM 10: 57



REINSTATEMENT

Principal Place of Business: 3312 LITHIA PINECREST RD, 3212 PINECREST ROAD, VALRICO FL 33594
Mailing Address: 3312 LITHIA PINECREST RD, 3212 PINECREST ROAD, VALRICO FL 33594

3. Date Incorporated or Qualified
11/15/1995

3a. Date of last report

2. Principal Place of Business

21 3312 LITHIA PINECREST

2a. Mailing Address

26 SAME

4. FEI Number

59-3346071

Applied For
Not Applicable

Suite, Apt. #, etc.

Suite, Apt. #, etc.

5. Certificate of Status Desired

\$8.75 Additional
Fee Required

22

27

6. Election Campaign Financing
Trust Fund Contribution

\$5.00 May Be
Added to Fees

23

28

City & State

City & State

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

24

Country HILLSBOROUGH

25

Country

29

30

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

CORPORATION SERVICE COMPANY
1201 HAYS STREET
TALLAHASSEE FL 32301-2525

81 Name PRATIV PATEL

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

3312 LITHIA PINECREST RD.

83

84 City VALRICO

FL

85 Zip Code 33594

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

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE	P	DELETE
NAME	3312 PATEL, PRATIV	
STREET ADDRESS	3212 LITHIA PINECREST ROAD	
CITY, ST, ZIP	VALRICO FL 33594	
TITLE	V	DELETE
NAME	3312 BAKARANIA, MAGAN L	
STREET ADDRESS	3212 LITHIA PINECREST ROAD	
CITY, ST, ZIP	VALRICO FL 33594	
TITLE	ST	DELETE
NAME	3312 PATEL, JOCELYN K	
STREET ADDRESS	3212 LITHIA PINECREST ROAD	
CITY, ST, ZIP	VALRICO FL 33594	
TITLE		DELETE
NAME		
STREET ADDRESS		
CITY, ST, ZIP		
TITLE		DELETE
NAME		
STREET ADDRESS		
CITY, ST, ZIP		

1. TITLE	P	Change	Addition
2. NAME	BAKARANIA, REHKA		
3. STREET ADDRESS	3312 LITHIA PINECREST ROAD		
4. CITY, ST, ZIP	VALRICO FL 33594		
5. TITLE	V	Change	Addition
6. NAME	PATEL, PRATIV		
7. STREET ADDRESS	3312 LITHIA PINECREST ROAD		
8. CITY, ST, ZIP	VALRICO FL 33594		
9. TITLE	ST	Change	Addition
10. NAME	PATEL, JOCELYN K		
11. STREET ADDRESS	3312 LITHIA PINECREST ROAD		
12. CITY, ST, ZIP	VALRICO FL 33594		
13. TITLE		Change	Addition
14. NAME			
15. STREET ADDRESS			
16. 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 appointed to execute this report as required by Chapter 672, Florida Statutes, and that my name appears in Block 12 or Block 13 if change or addition on an attachment with an address.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

11-27-96 (813) 654 2323

1-22-97