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

Mailing Address

2a. Mailing Address

City & State

 $Z_{\rm ID}$

changed or on an attachment with an address.

Selicee

NG OFFICER OR DIRECTOR

Suite, Apt. #, etc

US

26

27

28

29

9. Name and Address of Current Registered Agent

1100 S. RIGDEWOOD AVE

1100 SOUTH RIDGEWOOD AVE.

DAYTONA BEACH FL 32114-6110

PROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P95000091434 (7)

PUSHP, INC.

Principal Place of Business

1100 SOUTH RIDGEWOOD AVE.

2. Principa: Place of Business

BALOO, PRAVIN

appears in Block 12 or Block 13

SIGNATURE:

25

1100 S. RIDGEWOOD AVE

DAYTONA BEACH FL 32114

Suite, Apr. # lete

City & State

US

21

22

23

24

% RIDGEWOOD GARDENS Street Address (P.O. Box Number is Not Acceptable) 1100 SOUTH RIDGEWOOD AVE. 83 DAYTONA BEACH FL 32114 84 City 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 Signature, typed or pristed name of registered agent and fits if applicable (NOTE: Registered Agent signature required when reinstating) 12. OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 13. DELETE Change Addition **PVTD** 1.1 TITLE TITLE NAME PRAVIN BALGO 1.2 NAME 1100 S. RIDGEWOOD AVE STREET ADDRESS 1.3 STREET ADDRESS DAYTONA BEACH FL 1.4 CITY-ST-76 DITY - ST- ZIP Addition DELETE Change 2.1 TITLE TITLE PUSPA D. DAYAH 2.2 NAME NAME 1100 \$. RIDGEWOOD AVE. STREET ADDRESS 2.3 STREET ADORESS DAYTONA BEACH FL CITY-ST 2.4 CITY+ST-ZIP DELETE Change __ Addition TITLE 3.1 TITLE NAME 3.2 NAME 3.3 STREET ADDRESS STREET ADDRESS CITY - \$1 - Ziff 3.4. CITY - ST - ZIP DELETE Addition 41 TITLE Change THUE 4.2 NAME Nant STREET ADDRESS 4.3 STREET ADDRESS 4.4 CITY-ST-ZIP CHY-ST-ZIP DELETE Change Addition THE 5.1 TITLE NAM: 5.2 NAME STREET ADDRESS 5.3 STREET ADDRESS 5.4 CITY - ST-ZIP CITY - ST - ZIP DELETE Addition 6 1 TITLE Change TITLE 62 NAME NAME 63 STREET ADDRESS STREET ADDRESS CITY-51-ZIP 64 CITY-ST-ZIP 14. I do hereby 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

Country

81 Name

30

FILED Feb 04 1997 8:00am Secretary of State

3a. Date of Last Report

Applied For

\$8.75 Additional

Fee Required

\$5.00 May Be

Added to Fees

Not Applicable

06/14/1996

Yes 🗌 No

This corporation has liability for intangible tax under s. 199.032,

10. Name and Address of New Registered Agent



3. Date Incorporated or Qualified

5. Certificate of Status Desired

6. Election Campaign Financing

Trust Fund Contribution

12/01/1995

59-3347848

Florida Statutes

4, FEI Number