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

**PROFIT** CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE Sandra B. Mortham

Secretary of State **DIVISION OF CORPORATIONS** 

DOCUMENT # P96000027811 (4)

9. Name and Address of Current Registered Agent

Suresh Pinnamaneni MD Pa

PINNAMANENI, SURESH 8327 CORAL CREEK LOOP

HUDSON FL 34867-8007

Principal Place of Business Mailing Address 8327 CORAL CREEK LOOP 8327 CORAL CREEK LOOP HUDSON FL 34867-8007 HUDSON FL 34867-8007 DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified 03/25/1996 2. Principal Place of Business 2a. Mailing Address 4. FEI Number 59-3372707 21 Suite, Apt. #, etc. Suite, Apt. #. etc. 5. Certificate of Status Desired 22 27 City & State City & State 6. Election Campaign Financing 23 28 Trust Fund Contribution Zio Country Country 8. This corporation owes or has paid the current year Intangible ☐ Yes 25 30 Personal Property Tax due June 30. 29

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.

Name

4-29-193 SIGNATURE Signature, typed or united name of registered agent and title if applicable (NOTE Registered Agent signature required when reinstating) 12. OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 13. DELETE TITLE 1.1 TITLE ☐ Change Addition PINNAMANENI, SURESH NAME 1.2 NAME 8327 CORAL CREEK LOOP STREET ADDRESS 1.3 STREET ADDRESS HUDSON FL 34887-8007 CITY-ST-ZIP 1.4 CITY-ST-ZIP DELETE TITLE 2.1 TITLE Change Addition NAME 2.2 NAME STREET ADDRESS 2.3 STREET ADDRESS CITY-ST-ZIP 2.4 CITY-ST-ZIP DELETE TITLE Change Addition 3.1 TITLE NAME 3.2 NAME STREET ADORESS 3.3 STREET ADDRESS CITY-ST-ZIP 3.4. CITY-ST-ZIP DELETE 4.1 TITLE Change Addition NAME 4 2 NAME STREET ADORESS 4.3 STREET ADDRESS CITY-ST-ZIP 4.4 CITY - ST - ZIP Change DELETE 5.1 TITLE Addition NAME 52 NAME STREET ADDRESS 5.3 STREET ADDRESS CITY-ST-ZIP 54 CITY-ST-ZIP ☐ Change DELETE TITLE 6.1 TITLE Addition

14. I hereby certify that the information supplied with this filing 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

6.2 NAME

**6.3 STREET ADDRESS** 

6.4 CITY-ST-ZIP

SIGNATURE:

NAME

STREET ADDRESS

CITY-ST-ZIP

SURESH PINNAMANEN

4-29-1998

10. Name and Address of New Registered Agent

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

**FILED** 

May 08 1998 8:00am

Secretary of State

Applied For

\$8.75 Additional

Fee Required

\$5.00 May Be

Added to Fees

Not Applicable