

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

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Mar 13 1997 8:00am
Secretary of State

PROFIT
CORPORATION
ANNUAL REPORT
1997



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

DOCUMENT # P96000052933 (4)

1. Corporation Name
OHM INTERNATIONAL, INC.



Principal Place of Business
7973 THIRD AVE SOUTH
ST PETERSBURG FL 33707

Mailing Address
7973 THIRD AVE SOUTH
ST PETERSBURG FL 33707-1027

3. Date Incorporated or Qualified
06/21/1996

3a. Date of Last Report
Applied For
Not Applicable

2. Principal Place of Business
21 2634 E. Fowler Avenue
Suite, Apt. #, etc.

2a. Mailing Address
26 3906 Carrollwood Place Cir.
Suite, Apt. #, etc.

4. FEI Number
59-3389902

22 City & State
23 Tampa, FL

27 City & State
28 Tampa, FL

5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required

6. Election Campaign Financing
Trust Fund Contribution ☐ \$5.00 May Be Added to Fees

24 33612
Country

29 33624
Country

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

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

MCATEE, CAROL
7973 THIRD AVE SOUTH
ST PETERSBURG FL 33707

81 Name
Harry Patel
82 Street Address (P.O. Box Number is Not Acceptable)
3906 Carrollwood Place Circle #202
83
84 City
Tampa, FL
85 Zip Code
33624

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 agree to the obligations of Section 607.0505, Florida Statutes.

SIGNATURE HEMANT C. PATEL

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

1. TITLE	☐ DELETE
2. NAME	
3. STREET ADDRESS	
4. CITY - ST - ZIP	
5. TITLE	☐ DELETE
6. NAME	
7. STREET ADDRESS	
8. CITY - ST - ZIP	
9. TITLE	☐ DELETE
10. NAME	
11. STREET ADDRESS	
12. CITY - ST - ZIP	
13. TITLE	☐ DELETE
14. NAME	
15. STREET ADDRESS	
16. CITY - ST - ZIP	
17. TITLE	☐ DELETE
18. NAME	
19. STREET ADDRESS	
20. CITY - ST - ZIP	

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1. TITLE	☐ Change ☒ Addition
2. NAME	Director
3. STREET ADDRESS	Harry Patel
4. CITY - ST - ZIP	3906 Carrollwood Place Circle #202
5. TITLE	☐ Change ☐ Addition
6. NAME	
7. STREET ADDRESS	
8. CITY - ST - ZIP	
9. TITLE	☐ Change ☐ Addition
10. NAME	
11. STREET ADDRESS	
12. CITY - ST - ZIP	
13. TITLE	☐ Change ☐ Addition
14. NAME	
15. STREET ADDRESS	
16. CITY - ST - ZIP	
17. TITLE	☐ Change ☐ Addition
18. NAME	
19. STREET ADDRESS	
20. CITY - ST - ZIP	

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 included 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 a director or officer 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.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

HEMANT C. PATEL 813-972-3344

CR2E034 (9/96)