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PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

1997

DOCUMENT # P96000054503 (3)

HARMALA ENTERPRISES, INC.

FILED Apr 16 1997 8:00am Secretary of State



| Principal Place of Business 221 VINING COURT ORMOND BEACH FL 32176 | | Mailing Address 221 VINING COURT ORMOND BEACH FL 32176-8844 | | * 18911891 115 19118 91111 99111 99111 91111 91121 Ellet B1891 91111 35192 1111 1891 | |
|---|--|---|--|--|----------------------------------|
| | | | | 3. Date Incorporated or Qualified 06/24/1996 | 3a. Date of Last Report |
| | lace of Business | 2a. Mailing Address | 11.4174.1.1.1 | 4. FEI Number | Applied For |
| 21 2-2-1 Suite. Act | DINING COURT | 26 72 | <i>N</i> | 59-340 | |
| 22 | # etc. | Suite, Apt. #, ētc. | | 5. Certificate of Status Desired | \$8.75 Additional Fee Regulred |
| City & State | ····· | City & State | | 6. Election Campaign Financing | \$5.00 May Be |
| DRM | IOND BEACH, TLA | 28 | | Trust Fund Contribution | Added to Fees |
| Zio | Country | Zip | Country | 8. This corporation has liability for | • |
| 14 3 V | 9. Name and Address of Current | 29 Pagistered Agent | [30] | Florida Statutes 10. Name and Address of New Re | Yes No |
| CINC | | negistered Agent | 81 Name | 10. Name and Address of New Ne | Ristolan Wholit |
| SINGH, PARMJIT 221 VINING COURT | | | 00 8000 | SINGH, PARM | <u> </u> |
| | IOND BEACH FL 32176 | | 82 Street Ad | Idress (P.O. Box Number is Not Acceptab | * |
| • | | | 83 | | |
| | | | 84 City | 7 | 85 Zip Code _ |
| | | | 1 0 | RMONDBEACH | FL 32176 |
| | | | | orporation submits this statement for the praction's board of directors. I hereby accept | |
| agent La | rn familiar with, and accept the obligat | tions of, Section 607.0505 | , Florida Statutes. | | |
| SIGNATURE | Sturiation, typed or purifical rame of registered agen | d mad bits. Caracionista | (NOTE Registered Agent signature red | outred when reinstations | DATE |
| 12. | OFFICERS AND | | 13. | ADDITIONS/CHANGES TO OFFIC | |
| T ILF | PST | DELETE | 1.1 TITLE | | Change Addition |
| NAME | SINGH, PARMJIT / DI | ESIDENT | 1.2 NAME | | |
| STREET ADDRESS | PET THREE COUNTY | - mevi | 1.3 STREET ADDRESS | | |
| CHY ST ZIE | ORMOND BEACH FL 32176 | | 1.4 CiTY - ST - ZIP | | |
| T-TEF | SINGH, MAN; 221 UINING O DRYOND GEAC | T C C T DELETE | 21 TITLE | | Change Addition |
| NAMI | 37 1 1 1 1 1 1 1 1 | Vi Poc | 2 2 NAME | | |
| STREET ADDRESS | 221 010100 | City Vice Inco | 23 STREET ADDRESS | | |
| CHY-SI-ZP TILE | OKMOND REAC | 11,1 C 37-11 8 | 2 4 CITY - ST - ZIP 3.1 TITLE | | |
| | | | | | Change Addition |
| NAM: | | had been | | | Change Addition |
| | | broad SCEETE | 3.2 NAME | | Change Addition |
| STREET ADDRESS | | had Section | 3.2 NAME 3.3 STREET ADDRESS | | Change Addition |
| STREET ADORESS | | DELETE | 3.2 NAME | | , |
| STREAT ADDRESS CDY: ST-740 THEE | | | 3.2 NAME 3.3 STREET ADDRESS 3.4. CITY - ST - ZIP | | , |
| STREET ADDRESS (SDY-ST-746 THE NAME | | | 3 2 NAME 3 3 STREET ADDRESS 3 4. CITY - ST - ZIP 4.1 TITLE | · | , |
| STREAT ADDRESS : CDY: ST-799 THEF NAME STREAT ADDRESS | | ☐ DELETE | 3 2 NAME 3 3 STREET ADDRESS 3 4, CITY - ST - ZIP 4.1 TITLE 4 2 NAME | | Change Addition |
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professional windown reports the deciral accorate and making signature shall have the same legal effect as it made under of profession the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name langed, or on an attachment with an address. Lani an officer or director of the dorp appears in Block 12 or Block 13 Lo

SIGNATURE: