

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

PROFIT  
CORPORATION  
ANNUAL REPORT  
1999



FLORIDA DEPARTMENT OF STATE  
Katherine Harris  
Secretary of State  
DIVISION OF CORPORATIONS

DOCUMENT # P96000059718

1. Corporation Name  
TAJ IMPORTS INC.

Principal Place of Business  
29768 CITATION CIRCLE  
#101  
FARMINGTON HILLS MI 48331  
US

Mailing Address  
29768 CITATION CIRCLE  
#101  
FARMINGTON HILLS MI 48331  
US

2. Principal Place of Business

2a. Mailing Address

21 13205 WHITEHAVEN LANE 26 13205 WHITEHAVEN LANE  
Suite, Apt. #, etc. Suite, Apt. #, etc.

22 SUITE 1603

27 SUITE 1603

23 FORT MYERS, FL  
City & State

28 FORT MYERS, FL  
City & State

24 33912 25 USA  
Zip Country

29 33912 30 USA  
Zip Country

9. Name and Address of Current Registered Agent

VARSHNEY, A K  
6600 INDUSTRIAL DRIVE UNIT A-16  
FORT MYERS FL 33912

3. Date Incorporated or Qualified

07/12/1996

4. FEI Number

65-0681397

Applied For

Not Applicable

5. Certificate of Status Desired

☐

\$8.75 Additional  
Fee Required

6. Election Campaign Financing

☐

Trust Fund Contribution

\$5.00 May Be  
Added to Fees

8. This corporation owes the current year Intangible  
Personal Property Tax.

☒ Yes

☐ No

10. Name and Address of New Registered Agent

81 Name

MANOJ CHANDOK

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

13205 WHITEHAVEN LANE

83

SUITE - 1603

84

FORT MYERS

FL

85

33912  
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 printed name of registered agent and fee if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

2/16/99

12. OFFICERS AND DIRECTORS

TITLE D  
NAME CHANDOK, MANOJ  
STREET ADDRESS 29768 CITATION CIRCLE #101  
CITY-ST-ZIP FARMINGTON HILLS FL 48331  
☐ DELETE

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
☐ DELETE

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
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TITLE  
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STREET ADDRESS  
CITY-ST-ZIP  
☐ DELETE

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
☐ DELETE

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE D  
1.2 NAME CHANDOK, MANOJ  
1.3 STREET ADDRESS 13205 WHITEHAVEN LANE #1603  
1.4 CITY-ST-ZIP FORT MYERS FL 33912  
☒ Change ☐ Addition

2.1 TITLE  
2.2 NAME  
2.3 STREET ADDRESS  
2.4 CITY-ST-ZIP  
☐ Change ☐ Addition

3.1 TITLE  
3.2 NAME  
3.3 STREET ADDRESS  
3.4 CITY-ST-ZIP  
☐ Change ☐ Addition

4.1 TITLE  
4.2 NAME  
4.3 STREET ADDRESS  
4.4 CITY-ST-ZIP  
☐ Change ☐ Addition

5.1 TITLE  
5.2 NAME  
5.3 STREET ADDRESS  
5.4 CITY-ST-ZIP  
☐ Change ☐ Addition

6.1 TITLE  
6.2 NAME  
6.3 STREET ADDRESS  
6.4 CITY-ST-ZIP  
☐ Change ☐ 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 with all other like empowered.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

FILED  
Mar 04, 1999 8:00 am  
Secretary of State

03-04-1999 90077 012 \*\*\*150.00



DO NOT WRITE IN THIS SPACE

CR2E034 (1/98)