PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

1999

DOCUMENT # P9600063409

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Zip

FILED

Mar 10, 1999 8:00 am Secretary of State

03-10-1999 90210 034 ***150.00

. Corporation Name	. 000000	•
CORDODATE DI AZA	IMC	

Country

CADICATA OTEDUCALDE

9. Name and Address of Current Registered Agent

CORPORATE PLAZA, INC.

Principal Place of Business 76 - 36 265TH STREET NEW HYDE PARK NY 11040

2. Principal Place of Business

Suite, Apt. #, etc.

City & State

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Zip

Mailing Address

76 - 36 265TH STREET

NEW HYDE PARK NY 11040

2a. Mailing Address

City & State

Suite, Apt. #, etc.

DO NOT WRITE IN THIS SPACE

Applied For

\$8.75 Additional

Fee Required

\$5.00 May Be

Added to Fees

Yes

Not Applicable

⊠No

3. Date Incorporated or Qualifed

5. Certificate of Status Desired

6. Election Campaign Financing

8. This corporation owes the current year intangible

10. Name and Address of New Registered Agent

Trust Fund Contribution

Personal Property Tax.

07/29/1996

59-3394593

4. FEI Number

300 N STATE ST			82	Street					
PO E	3OX 635		83						
BUNNELL FL 32110			84	City		FL	85	Zip Co	de
office or re	to the provisions of Sections 607.0502 a egistered agent, or both, in the State of I m familiar with, and accept the obligation	Florida. Such change was autho	orized by	tne corpo	corporation submits this statement for the purporation's board of directors. I hereby accept the	ose of appoir	changin ntment a	g its re is regis	gistered tered
SIGNATURE		ALOTE D.			Tied ut as asing toback	DATE			
	Signature, typed or printed name of registered agent an OFFICERS AND I		13.	i signature r	equired when reinstating) ADDITIONS/CHANGES TO OFFICE		D DIRE	CTOR	S IN 12
TITLE	CPD OFFICERS AND I	☐ DELETE	1.1 TITLE		CPO		Cha		Addition
	· =	C Decemb	1.2 NAME		RONALD J. SZYMANSKI, SR 84 COMANCHE COURT			•	
NAME	SZYMANSKI, RONALD SR		1.3 STREET	ADDDECC.	84 COMANCHE COURT				
STREET ADDRESS	172 WILLOW AVE				PALM COAST, FLORIDA 3	771	37		
CITY-ST-ZIP	HACKENSACK NJ	[] DELETE	1.4 CITY-ST 2.1 TITLE	-214	THUM CONST PLURION S	<u>, C 1 .</u>	Cha	nge	Addition
TITLE	VD	Clorence	2.2 NAME					•	_
NAME	VERMA, SHYAM			ADDDECC	•				
STREET ADORESS	801 GARDEN ST		2.3 STREET						
CITY-ST-ZIP	TITUSVILLE FL	□ DELETE	2. 4 CITY-S	T-ZIP			[] Cha	nge	Addition
TITLE	SD	□ Dereie	3.1 TITLE						
NAME	Bajaj, randhir k		3.2 NAME						
STREET ADDRESS	85 COACHMAN PL		3.3 STREET	ADDRESS					
CITY-ST-ZIP	MUTTONTOWN NY		3.4. CITY- S	T- ZIP			Cha	500	Addition
TITLE	TD	☐ D€LETE	4.1 TITLE	Į.			Clia	nge	Auginon
NAME	DATT, KRISHAN G		4.2 NAME	1					
STREET ADDRESS	76-36 265TH ST		4.3 STREET	ADDRESS					
CNY-ST-ZIP	NEW HYDE PARK NY		4.4 CITY-S	r-ZtP					
TITLE	D	☐ DELETE	5.1 TITLE	,			Cha	nge	☐ Addition
NAME	GUPTA, RAJESH		5.2 NAME						
STREET ADDRESS	1986 STEWART AVE		5.3 STREE1	ADDRESS					
CITY-ST-ZIP	NEW HYDE PARK NY		5.4 CITY-S	Γ-ZIP					
TITLE	D	☐ DELETE	6.1 TITLE				Cha	nge	☐ Addition
NAME	DATT, SUMETT		6.2 NAME						
STREET ADDRESS	76-36 265TH ST		6.3 STREET	ADDRESS					
CITY-ST-ZIP	NEW HYDE PARK NY		6.4 CITY-S	r-ZIP					
					No Control 440 07/2V/X Florid Ctentron Lifted		416 44 -4	44a a	

Country

81 Name

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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:

CR2E034 (11/98)