## 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

P96000084897 (3) DOCUMENT #

KARMCO INT-EX-IM USA, INC.

## **FILED** Apr 27 1998 8:00am Secretary of State



Principal Place of Business Mailing Address					· · · · · ·		) INTINENTALON OF THE PRINT BONG FORES			(\$3)   (\$3)	
10611 NW 6 ( PLANTATION I			10611 NW 6 COURT PLANTATION FL 33324				DO NOT WRIT	TE IN THIS SPA	CE		
							3. Date Incorporated or Qualified				
							10/11/1996				
2. Principal Pl	ace of Business	2a. Mail	2a. Mailing Address				4. FEI Number	Applied For			
21	· <u>···</u>	26	+ 1				65-0702935	Not Applicable			
Sulte, Apt.	#, etc	<del>├</del>	Suite, Apt. #, etc.				5. Certificate of Status Desired		<b>8.75</b> A Fee Re	dditional guired	
City & State	<del></del>		City & State			-	6. Election Campaign Financing	· ·········		<del>`</del>	
23			28				6. Election Campaign Financing \$5.00 May Be Trust Fund Contribution Added to Fees				
Zip			Zip Country				8. This corporation owes or has paid the current year Intangible				
24	25	29		30			Personal Property Tax due June 30. 🔀 Yes 🔲 No				
	9. Name and Add	ress of Current Registered					10. Name and Address of New Registered Agent				
DAI	L <b>sani</b> a, mansukh			81	Name	е					
	11 NW 6 COURT					1 Address	ddress (P.O. Box Number is Not Acceptable)				
PLA	UNTATION FL 33324	•									
				84	City				5 Zip C	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 Y MANUSCRIPT TO SIGNATURE Y Signature, Lyquid or protect cannot of equitative depute and life of applicable (NOTE: Registered Agent signature required white reinstating)  DATE											
12.		OFFICERS AND DIRECTOR				-	ADDITIONS/CHANGES TO OFF	ICERS AND DI	RECTOR	S IN 12	
TITLE	D		☐ DELETE	1.1 TITLE					Change	Addition	
NAME	DALSANIA, MAN	Sukh		1.2 NAME		1					
STREET ADDRESS	10611 NW 6 CO			1.3 STREE	ADDRESS	5				i	
CITY-ST-ZIP	PLANTATION FL	33324		1.4 CITY - 3	T-ZIP						
TITLE			☐ DELETE	2.1 TITLE		1		Ш	Change	Addition	
NAME				2.2 NAME						ļ	
STREET ADDRESS				2.3 STREE	ADDRESS	\$					
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NAME				3.2 NAME							
STREET ADDRESS				3.3 STREF		·					
CITY-ST-ZIP			DELETE	3.4. CITY - 4.1 TITLE	SI-ZIP				Change	Addition	
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NAME STREET ANDRESS				4.3 STREE							
CITY-ST-ZIP				4.4 City-		<u> </u>					
TITLE	<del></del>		DELETE	5.1 TITLE	er = gut				Change	Addition	
NAME				5.2 NAME					-		
STREET ADDRESS				5.3 STAFE	ADDRESS	3					
CITY-ST-ZIP				5.4 CiTY-							
TITLE			☐ DELETÉ	61 TITLE					Change	Addition	
NAME				62 NAME							
STREET ADDRESS				63 STREE	ADDRESS	3					
CITY-ST-ZIP				6.4 CITY-	ST- <i>ZI</i> P						
14. I hereby o	ertify that the informat	tion supplied with this filing (	does not qualify fo	r the exemp	tion sta	ated in Sec	ction 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 trusted 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.

MANSUKA DALSANIA 4/20/98 (954) 370-7929