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

DOCUMENT #

P96000087594 (3)

SAMNI, INC.

Principal Place of Business

Mailing Address

500 EAST ORANGE AVENUE TALLAHASSEE FL 32301 500 EAST ORANGE AVENUE TALLAHASSEE FL 32301

FILED Apr 16 1998 8:00am Secretary of State

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

						10/18/1996				
2. Principal Place of Business		2a. Mailing Address				4. FEI Number	A	pplied For		
21		26				59-3424989	Not Applicable			
Suite, Apt. #, etc.		Suite, Apt. #, etc.	Suite, Apt. #, etc.			5. Certificate of Status Desired		Additional		
22		27				o. Cermodie of Status Desired	Fee R	equired		
City & State		City & State	City & State			6. Election Campaign Financing	\$5.00	May Be		
23		26	28			Trust Fund Contribution Added to Fees				
Zip	Country	Zip	Coi	intry		8. This corporation owes or has paid the curre	int year In	tangible		
24	25	29	30					No No		
9, Name and Address of Current Registered Agent					10. Name and Address of New Registered Agent					
PA	DGETT, TIMOTHY D			81	Name					
701 EAST TENNESSEE STREET				82 Street Address (P.O. Box Number is Not Acceptable)						
TALLAHASSEE FL 32308				State (1001000 (1.0. Dox (401100) to 1401 Acceptable)						
				83						
							14-11-5			
				84	City	FL	65 Zip	Code		
11. Pursuant	to the provisions of Sections 607.0502	and 607.1508, Florida Statut	es, the al	bove	e-named corpo	pration submits this statement for the purpose of c	hanging i	ts registered		
office or re	egistered agent, or both, in the State	of Florida. Such change was a	authorize	d by	the corporation	on's board of directors. I hereby accept the appoi	ntment as	registered		
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 ages	it and title if applicable (NO)	F Registere	d Ane	ni signatura required	d when reinstating) DATE				
12.	OFFICERS AND		13.			ADDITIONS/CHANGES TO OFFICERS AND I	DIRECTOR	RS IN 12		
TITLE	D	☐ DELETE	1.1 TI	TLE			Change	☐ Addition		
NAME	PATEL, MUKESH		1.2 N	AME	l			- 1		
STREET ADDRESS	500 EAST ORANGE AVENUE		R .		ADDRESS					
CITY-ST-ZIP	TALLAHASSEE FL 32301			ITY-S				(
TITLE	D	DELETE	21 Ti				Change	Addition		
NAME	PATEL, GITA		2.2 N/	AMF	i		-			
STREET ADDRESS	500 EAST ORANGE AVENUE			2.3 STREET ADDRESS			ļ			
CITY-ST-ZIP	TALLAHASSEE FL 32301				ST-ZIP			i		
TITLE	1722 4 8 10 00 00 1	DELETE	3.1 Tr		51- 21F		Change	Addition		
NAME			3.2 N			_				
j					ADDRESS			ĺ		
STREET ADDRESS										
CITY-ST-ZIP TITLE	-	DELETE	4.1 TI		ST-ZIP		Change	Addition		
		F recent				-	Unange	L. AVOIDOR		
NAME			4. 2 N		1000500					
STREET ADDRESS					ADDRESS					
CITY-ST-ZIP		Driett	4.4 CI		T-ZIP		Channe	1 (22)		
TITLE		☐ DELETE	5.1 TI			L	Change	Addition		
NAME			5.2 N/							
STREET ADDRESS			5.3 \$1	TREET	ADDRESS			-		
CITY - ST - ZIP			5.4 C		T-ZIP					
TITLE		DELETE	6.1 TI	TLE	}	L	Change	☐ Addition		
NAME			6.2 N	ame						
STREET ADDRESS			6.3 S1	TREET	ADDRESS					
CITY-ST-ZIP			6.4 CI	ITY-S	T- 21P			ĺ		
	ertify that the information supplied wi	th this filing does not qualify for				Section 119.07(3)(i), Florida Statutes. I further certi	ify that the	information		

• I nereby 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.

SIGNATURE:

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MUKESH PATEL

4-13-98

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