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

2a, Mailing Address

CORPORATION **ANNUAL REPORT**

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Søcretary of State **DIVISION OF CORPORATIONS**

DOCUMENT # P96000087931 (7)

P.D. INVESTMENTS.INC.

2. Principal Place of Business

21

Principal Place of Business	Mailing Address
5412 STEVEN ROAD	5412 STEVEN ROAD
BOYNTON BEACH FL 33437	BOYNTON BEACH FL 33437

FILED May 07 1998 8:00am Secretary of State



DO NOT WRITE IN THIS SPACE

Applied For

Not Applicable

3. Date Incorporated or Qualified

10/24/1996

59-3405984

Suite, Apt.	#, etc.	Suite, Apt. #, etc.				5. Certificate of Status Desired		\$8.75 / Fee Re		
22 City & Stat		City & State								
23		28	ny & State			6. Election Campaign Financing Trust Fund Contribution \$5.00 May Be Added to Fees				
Zıp	Country	Zip	Coun	itry		8. This corporation owes or has paid the current year Intangible				
24	25	29				Personal Property Tax due June 30. 🔲 Yes 🔼 No				
9, Name and Address of Current Registered Agent					·····	10. Name and Address of New R	egistered	Agent		
PATEL, GAUTAM C 323 C SO YOUNG ST. ORMOND BEACH FL 32174]1	81	Name					
				82 Street Address (P.O. Box Number is Not Acceptable)						
			T I	89 NONS						
			Ī	B4	City		FI	85 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 trite it applicable (NOTE Registered Agent signature required when reinstating) DATE										
12.	Signature, typed or printed name of registered agent OFFICERS AND		13.	Agent	signature required	ADDITIONS/CHANGES TO OFF	DATE ICEDS AND	DIDECTOR	OC INI 12	
TITLE	PTD	DELETE	1.1 101	E	Т	ADDITIONS/CHANGES TO OFF	ICENS AN	Change	Addition	
NAME	PATEL, AJIT	- Vicere	1.2 NAA		ĺ			C. C. Carrigo	7,000,100	
	7756 NEMEC DR. SOUTH								[
STREET ADDRESS					DDRESS					
CITY-ST-ZIP	LAKE CLARKE FL 33408	DELETE	1.4 CIT		ZIP			Change	Addition .	
TITLE	VD CHOCOLL	LJ VELETE	2.1 TITL		ĺ			Change	L Addalon	
NAME	DESAI, SURESH		2.2 NAA		. !				1	
STREET ADDRESS	5412 STEVEN RD.		2.3 STR		· · · · · · · · · · · · · · · · · · ·	*	. 4		1	
CITY-ST-ZIP	BOYNTON BEACH FL 33437	T Drugge	2.4 CIT		- ZIP			T 7 05		
TITLE	TS .	DELETE	3.1 TITL		į			Change	L.J. Addition	
NAME	PATEL, GAUTAM C		3.2 NAM		ľ					
STREET ADDRESS	323 C SO YOUNG ST		3.3 STRE		DDRESS					
CITY - ST - ZIP	ORMOND BEACH FL 32174		3 4. CIT		- ZIP					
TITLE		☐ DELETE	4.1 TITL	.E	ĺ			Change	Addition	
NAME			4. 2 NAJ	ME						
STREET ADDRESS			4.3 STR	EET A	DDRESS				j	
CrTY-ST-ZIP		, <u> </u>	4.4 CIT	Y-\$1.	ZIP					
TITLE		DELETE	5.1 TITL	E	{			Change	Addition	
NAME			5.2 NAN	Æ						
STREET ADDRESS			5.3 STR	EET AI	Doress				ĺ	
CITY-ST-ZIP			5.4 CITY	Y-ST <u>-</u>	ZIP					
TITLE		DELETE	6.1 TITL	E				Change	Addition	
RAME			6.2 NAN	AE					[
STREET ADDRESS			6.3 STR	EET AI	DDRESS					
City-SI-ZIP			6.4 CITY							
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										
maicated	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 eath; 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.

2/5/98 967-6383 (54)