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

PROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P96000088767 (4)

NUTIX BUSINESS SOLUTIONS, INC.

Principal Place of Business
2910 8W 22ND CIRCLE. DI

Mailing Address

FILED Apr 29 1997 8:00am Secretary of State



2910 8W 22NO DELRAY BEAC		2910 SW 22ND CIRCLE, D1 DELRAY BEACH FL 33445-78	B64			
				3. Date Incorporated or Qualified	3a. Date of Last Report	
				10/29/1996		
	lace of Business	2a. Mailing Address		4. FEI Number	Applied For	
	2 SW 22ND CIRCLE	26 2932 SW 2	22 CIRCI	LE 65-072588	Not Applicable	
Suite, Apt.	13 A	Suite, Apt. #, etc.		5, Certificate of Status Desired	\$8.75 Additional Fee Required	
City & Stat	LRAYBEACH, FL	City & State DELRAY BE	ACH, FL	Election Campaign Financing Trust Fund Contribution	\$5.00 May Be Added to Fees	
zip 24 334	.45 Country	²⁹ 33445 ₃₁	Country	8. This corporation has liability for		
	g. Name and Address of Current	11	<u></u>	10. Name and Address of New Re		
SIRIVOLU, NARENDRA 81 Name						
· · · · · · · · · · · · · · · · · · ·						
DELRAY BEACH FL 33445				cet Address (P.O. Box Number is Not Acceptable)		
,			83	#13A		
			84 City 9		les l Zio Codo	
				DELRAY BEACH	FL 85 Zip Code 33445	
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						
12,	Signature, typed or printed name of registered agent OFFICERS AND		logistured Agent a gnature		DATE.	
TITLE	D	DELFTE	13.	ADDITIONS/CHANGES TO OFFICE	Change Addition	
NAME	SIRIVOLU, NARENDRA		1.2 NAME	ELATIVALLE MARENDA	<u> </u>	
STREET ADDRESS	2910 SW 22ND CIRCLE, D1		1.3 STREET ADDRESS	2932 S.W 22mg circl	E, 13A 8	
CITY-ST-ZIP	DELRAY BEACH FL 33445		1.4 CITY-\$1-ZIP	DELRAY BEACH, FL	33445	
TITLE	D	DELETE	2.1 100.6	T.		
NAME	SIRIVOLU, SUNITHA		2.2 NAME	SIRIVOLU, SUNITH	4	
STREET ADDRESS	2910 SW 22ND CIRCLE, D1		2.3 STREET ADDRESS	2932 S.W 22nd CIRCI	E, 13A	
CITY-ST-ZIP	DELRAY BEACH FL 33445		2 4 CHY-ST-ZIP	DELRAY BEACH, F		
TITLE		☐ DELETE	3 1 1 II LE		Change Addition	
NAME			3.2 NAME			
STREET ADDRESS			3.3 STREET ADDRESS			
CITY-ST-ZIP			3.4. CITY - ST - ZIP	1		
TITLE		☐ DELETE	4.1 TITLE		Change	
NAME STREET APPROVES		,	4. 2 NAME			
STREET ADDRESS			4.3 STREET ADDRESS			
CITY-ST-ZIP TITLE		DELETE	4.4 CITY - ST - ZIP 5.1 TITLE		Chance	
NAME		_ Detter			L_I Change L_I Addition	
STREET ADDRESS	•		5.2 NAME 5.3 STREET ADDRESS			
CITY-ST-ZIP			5.4 CITY - ST - ZIP			
TITLE		DELETE	6.1 THLF		Change Addition	
NAME			6.2 NAME			
STREET ADDRESS			63 STREET ADDRESS			
CITY-ST-ZIP			6.4 CITY - ST - ZIP			
14. I do hereb	ov certify that the information supplied v	vith this filing does not qualify f		ated in Section 119 07(3)(i) Florida Statutos	Lifurther cortifu 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 comporation or the ecciver 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 claim ped, or on im attachment with line address.

The state of the s

1.110/97 /

1511)272 (121