1999



FLORIDA DEPARTMENT OF STATE

DIVISION OF CORPORATIONS

Mar 09, 1999 8:00 am Secretary of State Katherine Harris Secretary of State 03-09-1999 90024 043 ***150.00

DOCUN 1. Corporation FAIR DEA		100125			
Principal Place	of Business	Mailing Address			
2524 EAST BUSCH BOULEVARD 2524 EAST BUSCH BOULEVARD				,	
TAMPA FL 33612 TAMPA FL 33612				DO NOT WRITE IN THIS SPACE	
				3. Date Incorporated or Qualifed	
				12/11/1996 4. FEI Number Applied For	
<u> </u>	ace of Business	2a. Mailing Address		59-3413582 Not Applicat	
21		Suite, Apt. #, etc.		\$8.75 Additional	
Suite, Apt.	#, etc.	<u> </u>		5. Certificate of Status Desired Fee Required	
22 City 8 State		City & State		6. Election Campaign Financing \$5.00 May Be	
City & State	3	28		Trust Fund Contribution Added to Fees	
Zip	Country	Zip	Country	8. This corporation owes the current year Intangible	
24	25	29 30	<u> </u>	Personal Property Tax.	
	9. Name and Address of Current	Registered Agent		10. Name and Address of New Registered Agent	
SUMANI, ASHIO 2524 EAST BUSCH BLVD			81 Name NADIRSHAH RATTANI 82 Street Address (P.O. Box Number is Not Acceptable) 2.5.24 E RUSCH (LVD)		
	PA FL 33617		83	2324 E 103(1) 11C4)	
			84 City	TAMPA FL 85 Zip Code 33C/12	
office or re agent. I a	to the provisions of Sections 607.0502 egistered agent, or both, in the State of familiar with, and accept the obligation of the company of t	t Finnda. Siich chande was aut	iorized by the corbi	corporation submits this statement for the purpose of changing its registere- oration's board of directors. I hereby accept the appointment as registered	
SIGNATURE	Signature, typed or printed name of registered agent	and title if applicable. (NOTE: Re	gistered Agent signature ri	equired when reinstating) DATE	
12.	OFFICERS AND		13.	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	PD	AELETE	1.1 TITLE PD	Change Add	
NAME	SOMANI ASHIQ	4	1.2 NAME	NADIRSHAH N. RATTANI KONANGE LAGO 2524 E. BUSCH BIVD	
STREET ADDRESS	2524 EAST BUSCH BOULEVAR	0	1.3 STREET ADDRESS	T- 100 C/ 20/12	
CITY-ST-ZIP	TAMPA FL 33612		1.4 CITY-ST-ZIP	TAMPA, FL-33612	
TITLE	VD	D DELETE	2.1 TITLE VD	MUNIRA N. RATTANI	
NAME	ZOHAR SOMANI		2.2 NAME	MUNIKA NI KATIANI	
STREET ADDRESS	2524 EAST BUSCH BOULEVAR	D	2.3 STREET ADDRESS	2524 E. BUSCH BND	
CITY-ST-ZIP	TAMPA FL 33612		2.4 CITY-ST-ZIP	TAMPA, FL-33612	
TITLE		☐ DELETE	3.1 TITLE	Change Addi	
NAME			3.2 NAME		
STREET ADDRESS			3.3 STREET ADDRESS		
CITY-ST-ZIP			3.4. CITY-ST-ZIP	☐ Change ☐ Add	
TITLE		☐ DELETE	4.1 TITLE	Change ∐ Add	
NAME			4, 2 NAME		
STREET ADDRESS			4.3 STREET ADDRESS		
CITY-ST-ZIP		T DOLETE	4.4 CITY-ST-ZIP	☐ Change ☐ Add	
TITLE		☐ DELETE	5.1 TITLE 5.2 NAME		
NAME			5.3 STREET ADDRESS		
STREET ADDRESS			5.4 CITY-ST-ZIP		
CITY-ST-ZIP		□ DELETE	6.1 TITLE	☐ Change ☐ Add	

CITY-ST-ZIP 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.

6.2 NAME

6.3 STREET ADDRESS

SIGNATURE:

NAME

STREET ADDRESS

D OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR