

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

FILED

May 05 1997 8:00am
Secretary of State

PROFIT
CORPORATION
ANNUAL REPORT
1997



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P96000103365 (8)

1. Corporation Name
R TAROPAWALA, INC.



Principal Place of Business
338 SOUTH SCENIC HIGHWAY
LAKE WALES FL 33853

Mailing Address
338 SOUTH SCENIC HIGHWAY
LAKE WALES FL 33853-3837

2. Principal Place of Business
21 338 South Scenic Hwy
Suite, Apt. #, etc.
22
City & State
23 Lake Wales
Zip
24 33853 Country
25 Polk

2a. Mailing Address
26 338 S. Scenic Hwy
Suite, Apt. #, etc.
27
City & State
28 Lake Wales
Zip
29 33853 Country
30 Polk

3. Date Incorporated or Qualified
12/26/1996

3a. Date of Last Report

4. FEI Number
59-341-6141

Applied For
Not Applicable

5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required

6. Election Campaign Financing
Trust Fund Contribution ☐ \$5.00 May Be Added to Fees

8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes ☒ Yes ☐ No

9. Name and Address of Current Registered Agent

TAROPAWALA, RAMESH NAGIN
338 SOUTH SCENIC HIGHWAY
LAKE WALES FL 33853

10. Name and Address of New Registered Agent

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)

83

84 City

FL 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 title if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

TITLE PST ☐ DELETE
NAME TAROPAWALA, RAMESH NAGIN
STREET ADDRESS 338 SOUTH SCENIC HIGHWAY
CITY, ST, ZIP LAKE WALES FL 33853

TITLE VP ☐ DELETE
NAME TAROPAWALA, RAMESH NAGIN
STREET ADDRESS 338 SOUTH SCENIC HIGHWAY
CITY, ST, ZIP LAKE WALES FL 33853

TITLE ☐ DELETE
NAME
STREET ADDRESS
CITY, ST, ZIP

TITLE ☐ DELETE
NAME
STREET ADDRESS
CITY, ST, ZIP

TITLE ☐ DELETE
NAME
STREET ADDRESS
CITY, ST, ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE ☐ Change ☒ Addition
1.2 NAME → TAROPAWALA, RAMESH NAGIN DASH
1.3 STREET ADDRESS
1.4 CITY-ST-ZIP

2.1 TITLE ☐ Change ☒ Addition
2.2 NAME → TAROPAWALA, RAMESH NAGIN DASH
2.3 STREET ADDRESS
2.4 CITY-ST-ZIP

3.1 TITLE ☐ Change ☐ Addition
3.2 NAME
3.3 STREET ADDRESS
3.4 CITY-ST-ZIP

4.1 TITLE ☐ Change ☐ Addition
4.2 NAME
4.3 STREET ADDRESS
4.4 CITY-ST-ZIP

5.1 TITLE ☐ Change ☐ Addition
5.2 NAME
5.3 STREET ADDRESS
5.4 CITY-ST-ZIP

6.1 TITLE ☐ Change ☐ Addition
6.2 NAME
6.3 STREET ADDRESS
6.4 CITY-ST-ZIP

14. I do 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.

SIGNATURE: Ramesh N. Taropawala
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4/25/97 941-676-4133
Date Daytime Phone # 0010678

CR2E034 (9/96)