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

NAME

STREET ADDRESS

CITY-ST-ZIP

RATTEHALLI, N M

TAMPA FL 33618

15816 HAMPTON VILLAGE DR.

FILED Apr 02 1998 8:00am FLORIDA DEPARTMENT OF STATE CORPORATION Sandra B. Mortham Secretary of State ANNUAL REPORT Secretary of Stat 1998 DIVISION OF CORPOR TIONS P96000103650 (3) DOCUMENT # LAKSHMI INVESTMENTS INC. Principal Place of Business Mailing Address 15816 HAMPTON VILLAGE DR. 15816 HAMPTON VILLAGE DR. TAMPA FL 33618 TAMPA FL 33618 DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified <u>12/23/1996</u> 2. Principal Place of Business 2a. Mailing Address Applied For Not Applicable 21 26 59-3414716 Suite, Apt. #, etc. Suite, Apt. #, etc \$8.75 Additional 5. Certificate of Status Desired Fee Required 22 27 City & State City & State 6. Election Campaign Financing \$5.00 May Be 23 Trust Fund Contribution Added to Fees 28 Zip Country C This corporation owes or has paid the current year Intangible ☐ No 24 25 30 Personal Property Tax due June 30. Yes Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent **81** Name ANKALIKAR, SATISH 15816 HAMPTON VILLAGE DR. Street Address (P.O. Box Number is Not Acceptable) **TAMPA FL 33618** 83 84 City 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

3/23/98 of registered ager I and this if applicable (NOT): Rog stored Agent signature required when reinstating) (10/97 12 OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 13. DELETE Change Addition TITLE 111016 CR2E034 NAME NIRGUDKAR, ANIL G 1.2 NAME STREET ADDRESS 15816 HAMPTON VILLAGE DR. 1.3 STREET ADDRESS **TAMPA FL 33618** CITY-ST-ZIP 1.4 CITY-ST-ZIP DELETE Change Addition TITLE 21 1/11 F NAME ANKALIKAR, SATISH P 2.2 NAME STREET ADDRESS 15816 HAMPTON VILLAGE DR. 2.3 STREET ADDRESS **TAMPA FL 33618** City-St-ZiP 2 4 C/TY-ST-ZIP DELETE Change Addition 3.1 TITLE TITLE NAME KIRTIKAR. UDAY A 3.2 NAMI 15816 HAMPTON VILLAGE DR. STREET ADDRESS 3.3 STREET ADDRESS **TAMPA FL 33618** 3.4. CITY - ST- ZIP CITY - ST - ZIP Addition DELETE Change TITLE 4.1 THLE NAME Kulkarni, sameer m 4. 2 NAME 15816 HAMPTON VILLAGE DR. 4.3 STREET ADDRESS STREET ADDRESS **TAMPA FL 33618** 4.4 C/TY - ST - ZIP CITY-ST-ZIP DELETE 5.1 TITLE Change Addition TITLE NAME FU. EUGENE F 5.2 NAME 15816 HAMPTON VILLAGE DR. 5.3 STREET ADDRESS STREET ADDRESS **TAMPA FL 33618** CITY-ST-ZIP 5.4 CITY - ST - ZIP Addition DELETE Change TITLE 6.1 TiTLE

6.2 NAME

6.3 STREET ADDRESS

6.4 CITY - \$1 - ZIP 14. Thereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutos. I further certify that the information indicated on this annual report or supplemental annual report is true and accurate and that by 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 at 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.