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

PROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

FILED

Jan 28 1998 8:00am

Secretary of State

A ANDROPOLIA TARICONOLO COMO CONTRACTOR ANTO MARCOLO COMO COMO COMO COMO COMO

Sangra B. Mortnam

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT #

P97000012936 (5)

PUSHPAK, INC.

STREET ADDRESS

CITY-ST-ZIP

						RI KURKE PIDIO JOHON JIPIN DARI PODI
Principal Place of Business Mailing Address						
16301 MARTIN LUTHER KING BLVD. 16301 MARTIN LUTHER ALACHUA FL 32815 ALACHUA FL 32815			r king blvd.		DO NOT WRITE IN TI	HIS SPACE
					3. Date Incorporated or Qualified	
2. Principal Place of Business 28. Mailing Address					02/07/1997	
2. Principal Place of Business 2a. Mailing Addres 21 26					4. FEI Number 3430	34 Applied For Not Applicable
Suite, Apt. #, etc. Suite, Apt. #, etc.					1 - 30-18- L	\$8.75 Additional
22	27			5. Certificate of Status Desired	Fee Required	
City & State City & State			-		6. Election Campaign Financing	\$5.00 May Be
23	O-mate.	28 Zip	т .		Trust Fund Contribution	Added to Fees
Zip 24			Country 30		This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. Yes No	
[4]	9, Name and Address of Cur		30	·	Personal Property Tax due June 30. 10. Name and Address of New Register	
PATEL CHARUBEN S				Name		
18301 MARTIN LUTHER KING BLVD. ALACHUA FL 32615			82	Street Ad	et Address (P.O. Box Number is Not Acceptable)	
			83			
			84	City		85 Zip Code
## Durantish as it is a 40 star core core core				<u> </u>		- <u>!</u>
office or r	egistered agent, or both, in the St	ale of Florida. Such change was	nes, the abov authorized b	e-named co y the corpor	orporation submits this statement for the purpos ration's board of directors. I hereby accept the	e of changing its registered appointment as registered
agon. ra	m familiar with, and accept the ob	ligations of, Section 607.0505, F	lorida Statute	S .		
SIGNATURE	Signature, typed or printed name of registered	agent and title if applicable (NO	III. Registered Ag	ent signature req	DAT	<u> </u>
12.	OFFICERS AND DIRECTORS		13.		ADDITIONS/CHANGES TO OFFICERS A	
TITLE	D	L DELETE	1.1 TITLE			Change Addition
NAME	PATEL, SUMANT P		1.2 NAME			
STREET ADORESS	41 401 114 51 40045		1	ADDRESS		
CITY-ST-ZIP TITLE	h	ALACHUA FL 32615		ST - ZIP		Character Dadgeton
NAME	PATEL, CHARUBEN S		2.1 TITLE 2.2 NAME			Change Addition
STREET ADDRESS	****			ADDRESS	•	
CITY-ST-ZIP	ALACHUA FL 32615		2. 4 CITY-			
TITLE	D , 🔀 DELETE		3.1 TITLE	5-5-5-		Change Addition
NAME	PATEL, KAMLESH C		3.2 NAME			
STREET ADDRESS			3 3 STREET	ADDRESS		
CITY-ST-ZIP	ALACHUA FL 32615		3 4. CHY-	ST-ZIP		
TITLE		☐ DELET E	4.1 TITLE			☐ Change ☐ Addition
NAME STREET ADDRESS			4 2 NAME	1000000		
CITY-ST-ZIP			4.3 STREET			
TITLE			4.4 CITY - S 5.1 TITLE	1- th,		☐ Change ☐ Addition
NAME			5.2 NAME			C country
STREET ADDRESS			5.3 STREET	ADDRESS		
CITY-ST-ZIP			5.4 CITY-S	- 1		
TITLE		DELETE	6.1 TITLE			☐ Change ☐ Addition
NAME			6.2 NAME	- 1		

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.

6.3 STREET ADDRESS