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May 28 1998 8:00am
Secretary of State

PROFIT CORPORATION ANNUAL REPORT 1998

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

DOCUMENT # P97000030358 (0)
1. Corporation Name
LAXMI MANAGEMENT, INC.



Principal Place of Business
4872 CYPRESS WOODS DRIVE, #321
ORLANDO FL 32811

Mailing Address
4872 CYPRESS WOODS DRIVE, #321
ORLANDO FL 32811

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business 21 4960 W. IRLO BRANSON HWY Suite, Apt. #, etc.		26. Mailing Address 26 4960 W. IRLO BRANSON MEM HWY Suite, Apt. #, etc.		3. Date Incorporated or Qualified 04/03/1997	
22 City & State 23 KISSIMMEE FL		27 City & State 28 KISSIMMEE FL		4. FEI Number 59-3448199 59-348199 59-348199	
24 Zip 34746		29 Zip 34746		5. Certificate of Status Desired \$8.75 Additional Fee Required	
25 Country U.S.A		30 Country U.S.A		6. Election Campaign Financing Trust Fund Contribution \$5.00 May Be Added to Fees	
9. Name and Address of Current Registered Agent PATEL, ARVIND 4872 CYPRESS WOODS DRIVE, #321 ORLANDO FL 32811				10. Name and Address of New Registered Agent	
				81 Name JAY. R. PATEL	
				82 Street Address (P.O. Box Number is Not Acceptable) 4960 W. IRLO BRANSON MEM HWY	
				83	
				84 City KISSIMMEE FL	
				85 Zip Code 34746	

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 JAY. R. PATEL DATE 4/16/98

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	D	1.1 TITLE	D
NAME	PATEL, ARVIND	1.2 NAME	PATEL JAY. R.
STREET ADDRESS	4872 CYPRESS WOODS DRIVE, #321	1.3 STREET ADDRESS	4515 VILLAGE WOOD DR
CITY-ST-ZIP	ORLANDO FL 32811	1.4 CITY-ST-ZIP	ORLANDO FL 32835
TITLE	D	2.1 TITLE	D
NAME	PATEL, SANJAY	2.2 NAME	PATEL JAYANTI
STREET ADDRESS	4872 CYPRESS WOODS DRIVE, #321	2.3 STREET ADDRESS	531 WESSEX DR.
CITY-ST-ZIP	ORLANDO FL 32811	2.4 CITY-ST-ZIP	EVANS GEORGIA 30809
TITLE		3.1 TITLE	D
NAME		3.2 NAME	PATEL NARAN
STREET ADDRESS		3.3 STREET ADDRESS	5875 W. IRLO BRANSON MEM. HWY
CITY-ST-ZIP		3.4 CITY-ST-ZIP	KISSIMMEE FL 34746
TITLE		4.1 TITLE	
NAME		4.2 NAME	
STREET ADDRESS		4.3 STREET ADDRESS	
CITY-ST-ZIP		4.4 CITY-ST-ZIP	
TITLE		5.1 TITLE	
NAME		5.2 NAME	
STREET ADDRESS		5.3 STREET ADDRESS	
CITY-ST-ZIP		5.4 CITY-ST-ZIP	
TITLE		6.1 TITLE	
NAME		6.2 NAME	
STREET ADDRESS		6.3 STREET ADDRESS	
CITY-ST-ZIP		6.4 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.

SIGNATURE JAY. R. PATEL DATE 4/16/98 (407) 301-1271

CR2E034 (10/97)