

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

**FILED**  
**Apr 29, 1999 8:00 am**  
**Secretary of State**

04-29-1999 90089 048 \*\*\*150.00

0300577

PROFIT CORPORATION ANNUAL REPORT 1999



FLORIDA DEPARTMENT OF STATE  
**Katherine Harris**  
 Secretary of State  
 DIVISION OF CORPORATIONS

DOCUMENT # P97000042895

1. Corporation Name  
**GRANIT UNLIMITED, INC.**



Principal Place of Business  
 105 MALLARD COURT  
 ROYAL PALM BEACH FL 33411

Mailing Address  
 105 MALLARD COURT  
 ROYAL PALM BEACH FL 33411

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business  
 21 3949 WHALE BOAT WAY  
 Suite, Apt. #, etc.  
 22  
 City & State  
 23 WELLINGTON FL.  
 Zip  
 24 33414 Country  
 25 PALM BEACH

2a. Mailing Address  
 26 3949 WHALE BOAT WAY  
 Suite, Apt. #, etc.  
 27  
 City & State  
 28 WELLINGTON FL.  
 Zip  
 29 33414 Country  
 30 PALM BEACH

3. Date Incorporated or Qualified  
 05/14/1997

4. FEI Number  
 65-0807554 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 owes the current year Intangible Personal Property Tax.  Yes  No

9. Name and Address of Current Registered Agent  
**MANIAR, RAJU**  
 2306 NW 96 WAY  
 CORAL SPRINGS FL 33065

10. Name and Address of New Registered Agent  
 81 Name **MEHTA DILIP**  
 82 Street Address (P.O. Box Number is Not Acceptable)  
 3949 WHALE BOAT WAY  
 83  
 84 City **WELLINGTON** FL 85 Zip Code **33414**

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]* (DILIP MEHTA) PRESIDENT DATE 4/26/99

12. OFFICERS AND DIRECTORS

TITLE	D	<input type="checkbox"/> DELETE
NAME	MEHTA, DILIP	
STREET ADDRESS	105 MALLARD CT	
CITY-ST-ZIP	ROYAL PALM BEACH FL 33411	
TITLE		<input type="checkbox"/> DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE		<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
1.2 NAME	MEHTA DILIP	
1.3 STREET ADDRESS	3949 WHALE BOAT WAY	
1.4 CITY-ST-ZIP	WELLINGTON, FL-33414	
2.1 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
2.2 NAME		
2.3 STREET ADDRESS		
2.4 CITY-ST-ZIP		
3.1 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
3.2 NAME		
3.3 STREET ADDRESS		
3.4 CITY-ST-ZIP		
4.1 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
4.2 NAME		
4.3 STREET ADDRESS		
4.4 CITY-ST-ZIP		
5.1 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
5.2 NAME		
5.3 STREET ADDRESS		
5.4 CITY-ST-ZIP		
6.1 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
6.2 NAME		
6.3 STREET ADDRESS		
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, with all other like empowered.

SIGNATURE: *[Signature]* (DILIP MEHTA) DATE 4/26/99 DAYTIME PHONE # 561-753-6102

CR2E034 (11/98)