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Secretary of State

03-06-1999 90044 039 ***158.75

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PROFIT
CORPORATION
ANNUAL REPORT
1999



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

DOCUMENT # P97000044035

1. Corporation Name
SHRIJI SAVAK CORPORATION

Principal Place of Business
**2275 8 STREET
WINTER HAVEN FL 33881**

Mailing Address
**2275 8 STREET
WINTER HAVEN FL 33881**

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

05/19/1997

4. FEI Number

59-3447812

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.

☐

☒ No

2. Principal Place of Business

2a. Mailing Address

21 Suite, Apt. #, etc.

26 **SHRIJI SAVAK CORPORATION**

22 City & State

27 **2646 EVERLETH CT**

23 Zip

Country

28 **LAKE LAND**

Country

24

25

29 **33810**

30

9. Name and Address of Current Registered Agent

**PATEL, RAJESH
2275 8 STREET
WINTER HAVEN FL 33881**

10. Name and Address of New Registered Agent

81 Name

INDRAPRAKASH. B. PATEL

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

2646 EVERLETH CT

83

84 City

LAKE LAND

FL

85 Zip Code

33810

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]
Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

2-24-99

12. OFFICERS AND DIRECTORS

TITLE **PVD** ☒ DELETE
NAME **PATEL, BHAVESH**
STREET ADDRESS **2275 8 STREET**
CITY-ST-ZIP **WINTER HAVEN FL 33881**

TITLE **TD** ☒ DELETE
NAME **PATEL, RAJESH**
STREET ADDRESS **2275 8 STREET**
CITY-ST-ZIP **WINTER HAVEN FL 33881**

TITLE ☐ DELETE
NAME
STREET ADDRESS
CITY-ST-ZIP

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 **INDRAPRAKASH B. PATEL**
1.3 STREET ADDRESS **2646 EVERLETH CT.**
1.4 CITY-ST-ZIP **LAKE LAND, FL. 33810**

2.1 TITLE ☐ Change ☐ Addition
2.2 NAME
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 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]
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

2-24-99

Date

941-687-1818

Daytime Phone #

CR2E034 (11/98)