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

PROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT #

1. Corporation Name

ţ.

STREET ADDRESS

STREET ADDRESS

SIGNATURE:

CITY-ST-ZIP

CITY-ST-ZIP TITLE

NAME

P97000051883 (1)

SW LADHANI, INC.

Principal Place of Business Mailing Address 2049 HAVENDALE BLVD 2049 HAVENDALE BLVD WINTER HAVEN FL 33881 WINTER HAVEN FL 33881 DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified 06/12/1997 2. Principal Place of Business 2a. Mailing Address Applied For 21 26 Not Applicable Suite, Apt. #, etc. Suite, Apt. #, etc. \$8.75 Additional 5, Certificate of Status Desired Fee Required 22 City & State City & State 6. Election Campaign Financing \$5.00 May Be 23 28 Trust Fund Contribution Added to Fees Country Zip Country Žio 8. This corporation owes or has paid the current year Intangible 24 25 29 30 Personal Property Tax due June 30. ∏No 10. Name and Address of New Registered Agent g. Name and Address of Current Registered Agent B1 Name AMERILAWYER CHARTERED 343 ALMERIA AVENUE Street Address (P.O. Box Number is Not Acceptable) **CORAL GABLES FL 33134 B3** 84 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 Signature, typed or ne of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 12. DELETE 1.1 TITLE Change Addition TITLE PD LADHANI, SULTAN NAME 1.2 NAME STREET ADDRESS 2049 HAVENDALE BLVD 1.3 STREET ADDRESS WINTER HAVEN FL 33881 1.4 CITY - ST - ZIP CITY-ST-ZIP DELETE Change ___ Addition TITLE 2.1 T(TL€ NAME LADHANI, WAZIRALI 2.2 NAME 2049 HAVENDALE BLVD STREET ADDRESS 2.3 STREET ADDRESS CITY-ST-ZIP <u>Winter</u> Haven FL 33881 2. 4 CHTY-ST-ZIP DELETE TITLE 3.1 TITLE Change Addition NAME 3.2 NAME STREET ADDRESS 3.3 STREET ADDRESS CITY-ST-ZIP 3.4. CITY-ST-ZIP DELETE 4.1 TITLE ☐ Change Addition TITLE NAME 4.2 NAME STREET ADDRESS 4.3 STREET ADDRESS CITY-ST-ZIP 4.4 CITY - \$1 - ZIF DELETE Change Addition TITLE 51 TITLE

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 of 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. 16/98

5.2 NAME

6.1 TITLE

6.2 NAME

DELETE

5.3 STREET ADDRESS 5.4 CiTY-ST-ZIP

6.3 STREET ADDRESS 6.4 CITY-ST-ZIP

Change

Addition

FILED

Jan 22 1998 8:00am

Secretary of State