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

PROFIT CORPORATION ANNUAL REPORT 1998



FLORIDA DEPARTMENT OF STATE

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P97000054473 (8)

S.Y.B., INC.

FILED Apr 29 1998 8:00am Secretary of State



Principal Plac	ce of Business	Mailing Address		i reditent till tiltt italt ablit dater dater dater ditte ditte abbit 18000 tilt 1801
4827 DOGWOOD STREET		4827 DOGWOOD STREET		
NEW PORT RICHEY FL 34853		NEW PORT RICHEY FL 34853		DO NOT WRITE IN THIS SPACE
				3. Date Incorporated or Qualified
				06/20/1997
2. Principal P	lace of Business	2a. Mailing Address	14 al 11	4. FEI Number Applied For
<u> शर्म भारत्वा, ६८ ५०८</u> + भार		28 2991 66th St N.		59 · 3454196 Not Applicable
Suite, Apt.	ten Boine	Suite, Apt. #, etc.		5. Certificate of Status Desired \$8.75 Additional
City & Stat		City & State		Fee Required
_ ~ 1	elembum FC.	28 St Febers	bunge,	6. Election Campaign Financing \$5.00 May Be Trust Fund Contribution Added to Fees
7in	Country	Zip	Country	8. This corporation owes or has paid the current year Intangible
<u> 24 337</u>			10 Pinelly	Personal Property Tax due June 30. Yes No
•	9. Name and Address of Current	Registered Agent	241	16. Name and Address of New Registered Agent
AMERICATTER CRANTERED			81 Name	θ
343 ALMERIA AVENUE			62 Stree	t Address (P.O. Box Number is Not Acceptable)
CORAL GABLES FL 33134			83	
			63	
			84 City	FL 85 Zip Code
11. Pursuant	to the provisions of Sections 607.0502	and 607.1508, Florida Statutes	s, the above-name	
office or r	registered agent, or both, in the State of am familiar with, and accept the obligati	f Florida. Such change was au ions of, Section 607,0505, Flor	ithorized by the co ida Statutes.	d corporation submits this statement for the purpose of changing its registered irporation's board of directors. I hereby accept the appointment as registered
SIGNATURE				
	Signature, typed or printed name of registered agent			ore required when reinstating) DATE
12.	OFFICERS AND	DIRECTORS DELETE	13.	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12
TITLE	PATEL, VISHNU G	☐ DELETE	1.1 TITLE	Change Addition
NAME STREET ADDRESS	4827 DOGWOOD STREET		1.2 NAME	
CITY-ST-ZIP	NEW PORT RICHEY FL 34853		1.3 STREET ADDRESS 1.4 City - St - Zip	'
TITLE	VID	DELETE	2.1 TITLE	Change Addition
NAME	PATEL, PUHJABHAI J	_	2.2 NAME	_ , _
STREET ADDRESS	4827 DOGWOOD STREET		2.3 STREET ADDRESS	· ·
CITY-ST-ZIP	NEW PORT RICHEY FL 34653		2. 4 CITY - ST - ZIP	
TITLE		☐ DELETE	3.1 TITLE	Change Addition
NAME			3.2 NAME	
STREET ADDRESS			3.3 STREET ADORESS	;
CITY-ST-ZIP			3.4. CITY-ST-ZIP	
TITLE		☐ DELETE	4.1 TITLE	Change Addition
NAME			4. 2 NAME	
STREET ADDRESS			4.3 STREET ADDRESS	}
CITY - ST - ZIP			4.4 CITY-ST-ZIP	
TATLE		☐ DELETE	5.1 TITLE	Change Addition
NAME			5.2 NAME	
STREET ADDRESS			5.3 STREET ADDRESS	
CITY-ST-ZIP		T or ere	5.4 CITY-ST-ZIP	
TITLE		☐ DELETE	6.1 TITLE	Change Addition
NAME			6.2 NAME	
CONCUT ANNAUGE				
STREET ADDRESS			6.3 STREET ADDRESS	

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:

A.0600

PUNSABHAI PAJEL