## 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 # P97000062970 (3)

SHIPRA GROUP, INC.

6535	NW 46TH	ST.

## **FILED** May 14 1998 8:00am Secretary of State



Principal Place of Business Mailing Address				E113 61150 51016 101					
6535 NW 46TH ST. 6535 NW 46TH ST.		6535 NW 46TH ST.							
LAUDERHILL FL 33319 LAUDERHILL FL 33319					DO NOT WRITE IN THIS SPACE				
						3. Date Incorporated or Qualified		· · · · · ·	
						07/21/1997			
2. Principal Pla	ace of Business	2a. Mailing Address				4. FEI Number		Applied For	
21		26				65-0769977		Not Applicable	
Sulte, Apt. #	, etc.	Suite, Apt. #, etc.				5. Certificate of Status Desired		75 Additional	
22		27		g. Continuate of Clares Besilies	Fe	e Required			
City & State			City & State			6. Election Campaign Financing		00 May Be	
23	Country	7 <sub>(p)</sub>	ZID Country			Trust Fund Contribution		ded to Fees	
Zip	Country	29	<del> </del>			Personal Property Tax due Jurie 30	s or has paid the current year Intangible x due June 30.		
24	25 Name and Address of Curren		30			10. Name and Address of New Regis	<u> </u>		
1441	KUTA, DAVID B			81 1	Name				
	8 TYLER ST.			90 (	Discont Address	one (D.O. Boy Number is hist Acceptable)	1		
	LYWOOD FL 33020			82 5	Street Audre	ess (P.O. Box Number is Not Acceptable)	1		
1,00	2111000 12 00020		•	83					
			-	84 (	Ois .		loc l	Zin Codo	
				84 (	Dity		FL  85	Zip Code	
11, Pursuant to	the provisions of Sections 607.050	2 and 607.1508, Florida Statu	les, the at	ove-n	named corp	oration submits this statement for the pur	pose of changi	ng its registered	
agent. I an	gistered agent, or both, in the State • familiar with, and accept the obliga	of Florida: Such change was alions of, Section 607.0505, F	lorida Stat	utes.	ne corporati	ion's board of directors. I hereby accept t	ne appointmer	it as registered	
SIGNATURE 3	Signature, typed or printed name of registered age	of and title diapplicable (NO	TF: Registores	Agent s	signature require	ed when reinslating)	DATE		
12,	OFFICERS AND		13.		· · · · · · · · · · · · · · · · · · ·	ADDITIONS/CHANGES TO OFFICE	RS AND DIREC	TORS IN 12	
TITLE	DPS	☐ DELETE	1.1 111	LE			☐ Cha	nge 🔲 Addition 📙	
NAME	Mahanthi, gangadhar		1.2 NA	ME					
STREET ADDRESS	<b>65</b> 35 NW 46TH ST.		1.3 ST	REET AD	ORESS				
CITY-ST-ZIP	LAUDERHILL FL 33319		1.4 Cf	[Y-S[-]	ZIP				
TITLE		☐ DÉLETE	2.1 TH				☐ Cha	nge 🔲 Addition	
NAME			2.2 NA						
STREET ADDRESS				REET AD					
CITY-ST-ZIP		Driette		11Y-\$1-	ZIP		Cha	nge	
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NAME			3 2 NA						
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NAME		DEC.	4.2 N						
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CITY-ST-ZIP				TY-\$1-7	1				
TITLE		DELETE	5.1 TIT		-		Cha	nge Addition	
NAME			5.2 NA					[	
STREET ADDRESS				REET AD	DRESS			Į	
CITY-ST-ZIP				1Y-S1-					
TITLE		DELETE	6.1 TI				Cha	nge Addition	
NAME			6.2 NA	ME					
STREET ADDRESS			6.3 \$1	REET AC	DRESS			1	
CITY-ST-ZIP				TY-\$1-;					
14. I hereby c	ertify that the information supplied w	ith this filing does not qualify	for the exe	emptio	n stated in	Section 119.07(3)(i), Florida Statutes. I fu	rther certify tha	t the information	

Thereby comy that the information supplies who are the product in control of the exemption stated in Section 1.19.07(3)(1), Florida Statutes. Truther 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 other than 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.