

SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER SEPTEMBER 30, 1998.
AMOUNT DUE ON OR BEFORE 09/30/98: \$550 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$750).

PROFIT
CORPORATION
ANNUAL REPORT
1998



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P97000084035 (9)

1. Corporation Name

CHINTAN FOOD, INC.

Principal Place of Business

5500 CLARCONA OCOEE RD.
ORLANDO FL 32808

7835. 38th Ave N.

St. Petersburg FL 33709

Mailing Address

5600 CLARCONA OCOEE RD.
ORLANDO FL 32808

7835. 38th Ave N.

St. Petersburg FL 33709

2. Principal Place of Business

21 Suite, Apt. #, etc.

22 City & State

23 Zip

24 Country

2a. Mailing Address

26 Suite, Apt. #, etc.

27 City & State

28 Zip

29 Country

9. Name and Address of Current Registered Agent

KAPADIA, NILKANTH
5500 CLARCONA OCOEE RD.
ORLANDO FL 32808

KETAN SHAM
7835. 38th Ave N.

St. Petersburg FL 33709

81 Name

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

83

84 City

FL

85 Zip Code

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

09/29/1997

4. FEI Number

59.3512265 F.

Applied For

Not Applicable

5. Certificate of Status Desired

☐

\$8.75 Additional
Fee Required

6. Election Campaign Financing

☐

\$5.00 May Be
Added to Fees

8. This corporation owes or has paid the current year Intangible
Personal Property Tax due June 30.

☐ Yes

☐ No

10. Name and Address of New Registered Agent

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

Ketan H. Shah

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

(NOTE: Registered Agent signature required when reinstating)

DATE

7.10.98

12. OFFICERS AND DIRECTORS

TITLE PS ☐ DELETE

NAME SHAH, RAXA K

STREET ADDRESS 3 BOXELDER CT.

CITY-ST-ZIP HOMOSSASSA FL 34446

TITLE VT ☐ DELETE

NAME SHAH, KETAN H

STREET ADDRESS 3 BOXELDER CT.

CITY-ST-ZIP HOMOSSASSA FL 34446

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

1.3 STREET ADDRESS

1.4 CITY-ST-ZIP

2.1 TITLE

2.2 NAME

2.3 STREET ADDRESS

2.4 CITY-ST-ZIP

3.1 TITLE

3.2 NAME

3.3 STREET ADDRESS

3.4 CITY-ST-ZIP

4.1 TITLE

4.2 NAME

4.3 STREET ADDRESS

4.4 CITY-ST-ZIP

5.1 TITLE

5.2 NAME

5.3 STREET ADDRESS

5.4 CITY-ST-ZIP

6.1 TITLE

6.2 NAME

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

000002594520--5

-07/21/98--01096--015

***150.00 ***150.00

☐ Change ☐ Addition

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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:

Ketan H. Shah

REQUIRED

7.10.98

813.344.8591

Date

Daytime Phone #

CR2E034 (5/98)

CHINTAN FOOD, INC.
2018 S. CHICKASAW TR
ORLANDO, FL 32825
July 6, 1998

Secretary of State
Division of Corporation
P.O.Box 6327
Tallahassee FL 32314

Ref:- Document # P97000084035

Sub:- Waiver of penalty

Dear Sir/Madam,

With reference to above, I undersigned NILKANTH KAPADIA, President of CHINTAN FOOD, INC. would like to request you, as per your telephonic conversation with my accountant DINESH CHOKSHI. to waive the penalty for non-payment of Annual Filing Fees for 1998 on the following grounds.

We filed Annual Report for 1998 in the last week of 04/1998 together with the payment of \$150.00. The said form was received back by us for officer's signature. Later on we mailed back to your office together with officer's signature. Unfortunatley, we did not make copy of the same. When we received 2nd notice, it is deemed that it has been misplaced or lost in the mail. We never realized that the ckeck is not cleared yet. We would like to request you to waive the penalty on the basis of lack of knowledge and misunderstandings.

As per your request, we are enclosing herewith the check of \$150.00 being an annaul filing fee for 1998 as an exceptional case. Thanking you in advance for your cooperation. Sorry for the inconvenience that caused to you.

Sincerely,


(NILKANTH KAPADIA)

encl:- as above