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 # P97000097061 (0)

INDIA EXPRESS INC.

FILED Feb 19 1998 8:00am Secretary of State

DO NOT WRITI	E IN THIS SP	ACE	

					
Principal Plac		Mailing Address			
506 WEST CANAL STREET		506 WEST CANAL STREET			
MULBERRY FI	L 33960	MULBERRY FL 33960		DO NOT WRITE IN THE	\$ SPACE
ļ				3. Date Incorporated or Qualified	
	<u> </u>			11/13/1997	
	Place of Business	2a. Mailing Address		4, FEI Number	Applied For
	Te para w	26 SOB W Carrol	72	<u> </u>	Not Applicable
Suite, Apt.	#, etc.	Suite, Apt. #, etc.		5. Certificate of Status Desired	\$8.75 Additional
City & State		City & State			Fee Required
	_	28 MULBERRY - FL		6. Election Campaign Financing Trust Fund Contribution	\$5.00 May Be Added to Fees
23 77 V	LOERRY - FL Country	Zip	Country	Trust Fund Contribution 8. This corporation owes or has paid the contribution	
24 T338			30 0 2 6	Personal Property Tax due June 30.	Yes No
24]	9. Name and Address of Current		30 0 34	10. Name and Address of New Registere	
NO	ORANI, AKBAR		B1 Name		
110	B WEST CANAL STREET		90 - 00-00	(D.C. Davidson L. Mar. Assessable)	
	LBERRY FL 33860		82 Street Add	dress (P.O. Box Number is Not Acceptable)	
mu-	EDENNI PE 33000		63		
			84 City	F	B5 Zip Code
11. Pursuant office or r agent. I a	to the provisions of Sections 607.0502 registered agent, or both, in the State or familiar with, and accept the obligat	and 607.1508, Florida Sta tute of Florida. Such change was au ions of, Section 607.0505, Flor	s, the above-named cou thorized by the corpora ida Statutes.	rporation submits this statement for the purpose ation's board of directors. I hereby accept the appropriate the statement of	of changing its registered opointment as registered
SIGNATURE					
	Signature, typed or printed name of registered agent OFFICERS AND		Registered Agent signature requ		UD DIDECTORS IN 10
12.	D OFFICERS AND	DELETE	13. 1.1 TITLE	ADDITIONS/CHANGES TO OFFICERS A	Change Addition
NAME	NOORANI, AKBAR		1.2 NAME		
STREET ADDRESS	506 WEST CANAL STREET		1.3 STREET ADDRESS		
CITY-ST-ZIP	MULBERRY FL 33860				
TITLE	MULDERNI I C 33000	DELETE	1.4 CITY-ST-ZIP 2.1 TITLE		Change Addition
NAME			2.2 NAME		
STREET ADDRESS			2.3 STREET ADDRESS		
CITY-ST-ZIP			2. 4 CITY-ST-ZIP		
TITLE		DELETE	3.1 TITLE		Change Addition
NAME		-	3.2 NAME		
STREET ADDRESS			3.3 STREET ADDRESS		
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		
TITLE		☐ DEL ete	5.1 TITLE		Change Addition
NAME			5.2 NAME		• _
STREET ADDRESS			5.3 STREET ADDRESS		
CITY-ST-ZIP			5.4 CITY - ST - ZIP		
TITLE	<u> </u>	DELETE	6.1 TITLE		Change Addition
NAME		<u> </u>	6.2 NAME		
STREET ADDRESS			6.3 STREET ADDRESS		
CITY-ST-ZIP			6.4 City-ST-ZIP		
OII 1 - 51 - 21F 1			= n = U(1 1 - 31 - 1)F		

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

GM1-456.044)