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PROFIT CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P98000012117

NARAYAN-YOGI, INC.

Principal Place of Business

Mailing Address

381 N. MARKET BLVD.

381 N. MARKET BLVD. WEBSTER FL 33597

FILED May 05, 1999 8:00 am Secretary of State

05-05-1999 90052 014 ***150.00



WEBSTER FL 33597 DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualifed 02/05/1998 4. FEI Number 2a. Mailing Address Applied For 2. Principal Place of Business-26 381 N. MARKET BLYD 59.3489046 Not Applicable WEBSTER 21 Suite, Apt. #, etc. \$8.75 Additional Suite, Apt. #, etc. 5. Certifcate of Status Desired Fee Required 27 22 City & State City & State \$5.00 May Be 6. Election Campaign Financing \Box WEBSTER WEBSTER Trust Fund Contribution Added to Fees 28 23 Country Country Zip 8. This corporation owes the current year Intangible 7in £L. 33597 30 ☐ Yes FL.33597 25 FL Personal Property Tax. 29 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent 81 Name PATEL. DUSHYANT Street Address (P.O. Box Number is Not Acceptable) 82 12900 GARNET COURT CLERMONT FL 34711 83 Zip Code 84 85 City 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 Vice foonded SIGNATURE (NOTE: Registered Agent signature required when reinstating) of registered agent and title if applicable ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 OFFICERS AND DIRECTORS 12. 13. Addition ☐ Change PREJIDENT □ DELETE 1.1 TITLE TITLE RAJESH B. PATEL 1.2 NAME NAME 1309, ANDERSON ST. 1.3 STREET ADDRESS STREET ADDRESS CLERMONT FL 34711 CITY-ST-ZIP 1.4 CITY-ST-ZIP DELETE ☐ Change ☐ Addition DUST VICE-PRESIDENT 2.1 TITLE TITLE _DUSHYANT M. PATEL 22 NAME NAME 12900 GARNET CT. 2.3 STREET ADDRESS STREET ADDRESS CLERMONT FL. 34711 2.4 CITY-ST-ZIP CITY-ST-ZIP Change ☐ Addition ☐ DELETE 3.1 TITLE TITLE 3.2 NAME NAME 3.3 STREET ADDRESS STREET ADDRESS 3.4. CITY-ST-ZIP CITY-ST-ZIP Change Addition DELETE 41 TITLE 4. 2 NAME NAME 4.3 STREET ADDRESS STREET ADDRESS 4.4 CITY-ST-ZIP CITY-ST-ZIP Addition ☐ DELETE Change 51 TITLE TITLE 5.2 NAME NAME 5.3 STREET ADDRESS STREET ADDRESS 5.4 CITY-ST-ZIP CITY-ST-ZIF ☐ Addition DELETE 6.1 TITLE 6.2 NAME NAME 6.3 STREET ADDRESS STREET ADDRESS 6.4 CITY-ST-ZIP

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 nt with an address, with all other like empowered Block 12 or Block 13 if changed, or on an attachr

CITY-ST-ZIP

SIGNATURE: SIGNATURE AND TYPED OF PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

352-793-1202

(11/98)CR2E034