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

PROFIT CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # **P98000099508** 1. Corporation Name

RADHARAJ, INC.

FILED Mar 01, 1999 8:00 am Secretary of State **Katherine Harris**

03-01-1999 90206 033 ***150.00



	w, 1110.									
Principal Place	e of Business	Mailing A	ddress					46) 40 6 1	10 10101 VILII VE)
104 FERNWOOD	CIRCLE	104 FERNW	104 FERNWOOD CIRCLE				<u> </u>			
			EACH FL 32114							
							DO NOT WRIT	E IN THIS !	SPACE	— <u> </u>
							3. Date Incorporated or Qualifed		ر سپسم	
							11/30/1998		11.	<u> </u>
2. Principal P	lace of Business	2a. Mailin	g Address				4. FEI Number			olied For
21		26					59 3544 537			Applicable
Suite, Apt.	#, etc.	— — ·	Apt. #, etc.				5. Certifcate of Status Desired		\$8.75 A	
22		27								<u>-</u>
City & Stat	e	— ·	State				6. Election Campaign Financing		\$5.00	- 1
23		28					Trust Fund Contribution	`	Added to	rees
Zip	Country	Zip		Country	,		8. This corporation owes the curre	ent year Inta		
24	25	29		0			Personal Property Tax.	!		□No
,	9. Name and Address of Curre	ent Registered A	Agent	04	Nt		10. Name and Address of New R	egistered A	yent	_
DATE	L BHADDECHLI			81	Name					
	L, BHADRESHI I			82	Street	Addre	ss (P.O. Box Number is Not Accepta	ble)		
104 FERNWOOD CIRCLE										<u> </u>
DAYI	ONA BEACH FL 32114			83						
				84	City				85 Zip C	inde:
				04	City			FL	00 2.00	
office or r	to the provisions of Sections 607.05 egistered agent, or both, in the State m familiar with, and accept the oblig	e of Florida. Suc	h change was auti	nonzed by	tne corp	oration	ration submits this statement for the i's board of directors. I hereby accep	t the appoin	manging its tment as rec	gistered
SIGNATURE	Signature, typed or printed name of registered ag	gent and title if applicab	le. (NOTE: R	tegistered Age	nt signature	required :	when reinstating)	DATE		
12.	OFFICERS A	ND DIRECTOR	S	13.			ADDITIONS/CHANGES TO OF	FICERS AN		
TITLE	\mathcal{D}		☐ DELETE	1.1 TITLE		a	-		Change	Addition
NAME	Patel Bhadresh :	T.		1.2 NAME		Hr.	tel Bhadrash I	-	-	
STREET ADDRESS	104 Fernusod Cir	cle		1.3 STREE	TADDRESS		+ Fernwood Circle			
CITY-ST-ZIP	Daytona Beach	F1 32114		14 CITY-S	T-ZIP	0	astona Beh Flis	35114		
TITLE			☐ DELETE	2.1 TITLE		1			Change	☐ Addition
NAME				2.2 NAME						
STREET ADDRESS				2.3 STREE	TADORESS					
CITY-ST-ZIP				2.4 CITY-	ST-ZIP					
TITLE			☐ DELETE	3.1 TITLE		1			☐ Change	☐ Addition
NAME				3.2 NAME						
STREET ADDRESS				1	TADORESS	1				
				3.4. CITY-1						
CITY-ST-ZIP TITLE			DELETE	4.1 TITLE	3 1 - EM.	+			☐ Change	Addition
				4. 2 NAME						
NAME					TADORESS					
STREET ADDRESS				1						
CITY-ST-ZIP				4.4 CITY- 5	i1-⊿P		·		Change	Addition
TITLE			- DETELE	5.1 TITLE 5.2 NAME		1				
NAME					T 40000000					•
STREET ADDRESS					TADORESS	1				
CITY-ST-ZIP				5.4 CITY- S	I-ZIP	-			Change	Addition
TITLE			☐ DELETE	6.1 TITLE					Change	
NAME				6.2 NAME						
STREET ADDRESS					TADDRESS	1				
CITY-ST-ZIP				6.4 CITY-S	T-ZIP	1				

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, with all other like empowered.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Daytime Phone #