

2004 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 26, 2004 8:00 am
Secretary of State

04-26-2004 90548 037 ***150.00

DOCUMENT # P99000067010	
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1. Entity Name
CHINTAL INC.

Principal Place of Business
2451 5TH AVE. N.
ST. PETERSBURG, FL 33713

Mailing Address
2876 29TH AVE NORTH
ST. PETERSBURG, FL 33713



04202004 No Chg-P CR2E034 (10/03)

DO NOT WRITE IN THIS SPACE

4. FEI Number 59-3589783	Applied For <input type="checkbox"/> Not Applicable
5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required	

6. Name and Address of Current Registered Agent

PATEL, NARENDRA
2451 5TH AVE. N.
ST. PETERSBURG, FL 33713

**DO NOT WRITE
IN THIS SPACE**

8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent.

SIGNATURE _____
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE _____

**FILE NOW!!! FEE IS \$150.00
After May 1, 2004 Fee will be \$550.00**

9. Election Campaign Financing
Trust Fund Contribution. ☐ **\$5.00 May Be Added to Fees**

10. OFFICERS AND DIRECTORS

TITLE	PCD
NAME	PATEL, VARSHA N
STREET ADDRESS	2876 29TH AVE NORTH
CITY-ST-ZIP	SAINT PETERSBURG, FL 33713
TITLE	Janmejaya Patel DIRECTOR
NAME	2876, 29th Ave N
STREET ADDRESS	St Petersburg FL 33713
CITY-ST-ZIP	
TITLE	VP
NAME	NARENDRA PATEL
STREET ADDRESS	2876, 29th Ave N
CITY-ST-ZIP	St Petersburg FL 33713
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

**DO NOT WRITE
IN THIS SPACE**

12. 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 report or supplemental 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: Nm Patel 4/26/04 727-327-8784
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #