FILE NOW: FILING FEE AFTER MAY 1 IS $225.00

CORPORATION ANNUAL REPORT
1995

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

APPROVED AND FILED

95 JAN 10 AM 11:27

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # V13087 (4)

1. Corporation Name
BOBSONS INTERNATIONAL INC.

Principal Place of Business	Mailing Address
STATE DISCOUNT 4704 S. ORANGE BLOSSOM TRAIL ORLANDO FL 32809 US	6000 S RIO GRANDE AVE STE 204 ORLANDO FL 32809 US

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified: 02/11/1992
3a. Date of Last Report: 02/28/1994

2. Principal Place of Business
21 H&D BEVERAGES
22 Suite, Apt. #, etc.: 5781 LACOSTA DRIVE
23 City & State: ORLANDO FL
24 Zip: 32807 25 Country: USA

2a. Mailing Address
26 5781 LACOSTA DRIVE
27 Suite, Apt. #, etc.:
28 City & State: ORLANDO FL.
29 Zip: 32807 30 Country: USA

4. FEI Number: 59-3125515 ☐ Applied For ☐ Not Applicable

5. Certificate of Status Desired ☑ $8.75 Additional Fee Required

6. Election Campaign Financing Trust Fund Contribution ☐ $5.00 May Be Added to Fees

8. This corporation has liability for intangible tax under S. 199.032, Florida Statutes ☐ Yes ☐ No

9. Name and Address of Current Registered Agent

DEEPAM GOKAL
6144 ORANGE HILL CT.
ORLANDO FL 32819

10. Name and Address of New Registered Agent

81 Name: DEEPAM GOKAL
82 Street Address (P.O. Box Number is Not Acceptable): 5781 LACOSTA DRIVE
83
84 City: ORLANDO FL 85 Zip Code: 32807

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: [signature] PRESIDENT — 01/09/1995
(If changing Registered Agent, Registered Agent must sign) (If changing Registered Agent, Registered Agent must sign) (DATE)

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
01 TITLE	PMD	01 TITLE	☐ Change ☐ Addition
02 NAME	GOKAL, DEEPAM	02 NAME	
03 STREET ADDRESS	6144 ORANGE HILL CT.	03 STREET ADDRESS	
04 CITY-ST-ZIP	ORLANDO FL	04 CITY-ST-ZIP	
05 TITLE	VS	05 TITLE	☑ Change ☐ Addition
06 NAME	GOKAL, BABOOLAL	06 NAME	GOKAL, BABOOLAL
07 STREET ADDRESS	296 TAJ ST, LADIUM, 0037	07 STREET ADDRESS	296 TAJ STREET, LAUDIUM,
08 CITY-ST-ZIP	PRETORIA TR	08 CITY-ST-ZIP	PRETORIA, SOUTH AFRICA, 0039
09 TITLE		09 TITLE	D ☐ Change ☑ Addition
10 NAME		10 NAME	GOKAL, KUSUN
11 STREET ADDRESS		11 STREET ADDRESS	296 TAJ STREET, LAUDIUM
12 CITY-ST-ZIP		12 CITY-ST-ZIP	PRETORIA, SOUTH AFRICA, 0037
13 TITLE		13 TITLE	☐ Change ☐ Addition
14 NAME		14 NAME	
15 STREET ADDRESS		15 STREET ADDRESS	
16 CITY-ST-ZIP		16 CITY-ST-ZIP	
17 TITLE		17 TITLE	☐ Change ☐ Addition
18 NAME		18 NAME	
19 STREET ADDRESS		19 STREET ADDRESS	
20 CITY-ST-ZIP		20 CITY-ST-ZIP	
21 TITLE		21 TITLE	☐ Change ☐ Addition
22 NAME		22 NAME	
23 STREET ADDRESS		23 STREET ADDRESS	
24 CITY-ST-ZIP		24 CITY-ST-ZIP	

14. For Florida, I certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemptions 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: [signature] PRES. — 01/09/1995 — (407)658-7632
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR (Date) (Daytime Phone #)