PROFIT CORPORATION ANNUAL REPORT 1996 DOCUMENT # V15530 2IRAN BELLA, INC. KIRAN BELLA, INC.		FL Logs	ORIOA DEPARTME Sandra B. Mo Secretary of DIVISION OF CORE	NT OF STATE rtham State		
		_	(1)			
829 RID	ace of Business XGEWOOD AVENUE HILL, FKL 32117		dress IDGEWOOD AVENUE 1 HILL. FKL 32117			
					3. Date incorporated or Qualified 02/20/1992	3a. Date of Last Report 10/23/1995
2. Principal	Place of Business	2a. Mailing	Address		4. FEI Number	Applied For
Suite, Ap	t. #, etc.	Suite A	ışıt. #, etc.		59-3109562	✓ Not Applicable \$8.75 Additional
Crty & Sta		[27]			5. Certificate of Status Desired	Fee Required
23	ate	City & S	State 		Election Campaign Financing Trust Fund Contribution	\$5.00 May Be Added to Fees
Zip 24	Country Zip 25 29		├ ──¬	Country	8. This corporation has liability for inta	angible tax under s. 199.032,
2-4	9. Name and Address of Curre		jent 30	· 	Florida Statutes Yes [10. Name and Address of New Reg	
11. Pursuani or registr familiar v SIGNATURE	t to the provisions of Sections 607,050 ered agent, or both, in the State of For with, and accept the obligations of, Sec	2 and 607.1508, F ida. Suda change tion 607.0505, Flo	lorida Statutes, the a was authorized by tr wda Statutes	84 City bove named corporation's box	oration submits this stalement for the purpo and of directors. Thereby accept the appoint	FL 85 Zip Code se of changing its registered office trient as registered agent. I am
12.	Signature, typed or printed name, of registrated ages			ned Ajerit signal in redjuir		DATE
TITLE	P OFFICERS AN	ID DIFIECTORS	1.00.000	3. 1 THE	ADDITIONS/CHANGES TO OFFICE	RS AND DIRECTORS IN 12
NAME	PATEL, KIRAN P	•==	i i	2 NAME		RS AND DIRECTORS IN 12 Change Addition
STREET ADDRESS			1:	STREET ADDRESS		S
CITY-ST-Z-P TITLE	HOLLY HILL FL 32117	··	COLUMN	CHY-ST-ZiP		
NAME		ل <u>ب</u>		T TITLE NAME		☐ Change ☐ Addition ☐
STREET ADDRESS				STREET ADDRESS	,	
CITY-ST-ZIP TITLE			OF ST	CITY-ST-ZIP		
NAME		LJ		TITILE NAME		Change Addition
STREET ADDRESS				STREET ADDRESS		
CITY-ST-ZIP				CITY - ST - ZIP		
TITLE NAME		Ш		TITLE	50000130; -05/06/960101; ***200.00	Cargo Addition
STREET ADDRESS				NAME STREET ADDRESS	***500 00	6030
CITY-ST-ZIP				City - St - ZiP		
TIFLE			DELETE 5	THILE		Change Addition
NAME STREET ADDRESS				NAME CURRED ADDROSCO		
CITY-ST-ZIP				STREET ADDRESS CITY - S* - 7-P		
TITLE		[]	5.5.57.6	TITLE		☐ Change ☐ Addition
NAME			62	NAME		27,196
STREET ADDRESS			-	1		

CITY_ST-ZIP

14. I do hereby certify that the information supplied with this filing is volunterly furnished and does not qually for the exemption stated in Section 119.07(3)(k). 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 appears in Block 12 or Block 13 if changed, or on a statchment with an address.

SIGNATURE:

| Continue of the composition of the composition of the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name the continue of the composition of the com

4.29,96 (904) 253-