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

PROFIT CORPORATION ANNUAL REPORT

1997

Principal Place of Business



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

POCUMENT # V41374

SHARMILA ENTERPRISES, INC.

(2)

Mailing Address

FILED Mar 13 1997 8:00am Secretary of State



VERO BEACH	1 FL 82968	2495 27TH AVE. S.W. VERO BEACH FL 32968-7814								
2, Principal Place of Business 26, Mailing Andress							3. Date Incorporated or Qualified			't
21	T IACE OF BUSINESS	2e. Mailing Address				4. FEI Number	1 33,00	Applied	d For	
Suite, Apt	t. #, etc.	Suite, Apt. #, etc.				59-3126485			plicable	
22			27				5. Certificate of Status Desired	\$8.75 Additional		
City & State			City & State				6. Election Campaign Financing		ee Require	
23			28							
Zip 24	· C	Zip Country			/	8. This corporation has liability for intangible tax under s. 199.032,				
24	25		29 30				Florida Statutes Yes No			
	V. Name and A	ddress of Currer	nt Registered Agent			,	10. Name and Address of New Re		·	
	THAK, N	D D			81	Name			· · · · · ·	
9431 BNLOOMFIELD DR UNIT C2						Street Add	ddress (P.O. Box Number is Not Acceptable)			
PALM BEHAC GARDENS FL 33444					L			10)		
rai 	M DETIAL DAKU	ENS FL 33444			83					
変数 大変数 かっこ					84	City			7. 6 .	
11. Purcuant	to the provisions of	D						FL B5	Zip Code	
office or	registered agent, or	both, in the State	z and 607.1508, Florid of Florida. Such chanc	a Statutes, the re was authori	abovo dibas	e-named corp	poration submits this statement for the p	urpose of chang	ing its regi	istered
agent. I a	am familiar with, and	accept the obliga	ations of, Section 607.0	505, Florida S	tatules	г пе согрога 3.	poration submits this statement for the p tion's board of directors. I hereby accep	t the appointmo	nt as regis	tered
SIGNATURE								2105	107	- 1
12.	Signature, type of the printed	OFFICERS AND				nt signaturu requi	red when reinstating)	DATE	, , , ,	
TOLE	0	OFFICE HIS AND	DEL	10			ADDITIONS/CHANGES TO OFFIC	ERS AND DIRE	CTORS IN	12
NAME	PATHAK, BHAV	esh		I '''	TITLE		:	☐ Ch	ange 🔲	Addition
STREET ADDRESS	1524 41ST AVE				NAME					
CITY-ST-ZIP	VERO BEACH F	L				ADDRESS				
TITLE	0		DEL	1.4 F I E 2.1	CITY-ST	I - ZIP				
NAME	Pathak, Shar	MILA			2.1 TITLE 2.2 NAME 2.3 STREET ADDRESS			Ļ Cha	ange [_]/	Addition
STREET ADDRESS	1524 41ST AVE									
CITY-ST-ZIP	VERO BEACH F	Ĺ								
TITLE			DEL!		TITLE	1-71F				
NAME					NAME			Cha	inge 🔲 A	Addition
STREET ADDRESS						ADDRESS	:			
CITY-ST-ZIP					CITY-SI	1]
TITLE			DELE		TITLE	- ZIP		110		
NAME			_		NAME			∐ Cha	nge 🔲 A	Addition
STREET ADDRESS					STREET A	Doncee				
CITY-ST-ZIP					CITY-ST					
TITLE			DELF		INLE	- ZIF				100
NAME					NAME			∐ Cha	nge 🗀 A	ddition
STREET ADDRESS					STREET A	DUBESS				
CITY-ST-ZIP		_				I				ĺ
TITLE		DELE		5.4 CITY - ST - 7IP 6.1 TITLE			0.5		4737	
NAME				6.2)				Char	ige [] Ai	ddition
TREET ADDRESS				B	TREFT AL	DORESS				
PIS-TR					HY-SI-					
4 I da barat.				0.4 (4.0				1

I do heraby 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 appears in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE: 12 STEWARD OF THE