FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State

DIVISION OF CORPORATIONS

1996

1. Corporation Name

V60484 **DOCUMENT #**

(5)

GOHIL ENTERPRISES, INC.

GOHIL ENTERPRISES, INC.				
rincipal Place of Business	Mailing Address		1 18811 Q11E1E 81111 ABD1 18181 181	4:4: 2:2:
11149 W COLONIAL DR OCOEE FL 34761	11149 W COLONIAL D OCOEE FL 34761	DIR		
US .	U\$		 Date Incorporated or Qualified 08/27/1992 	05/01/1995
Principal Place of Business	2a. Mailing Address		4. FEI Number 59-3138942	Applied For Not Applical
	26		59°3 130942	S8.75 Additional
Suite, Apt. #, etc.	Suite, Apt. #, etc.		5. Certificate of Status Desired	Fee Required
City & State	City & State		Election Campaign Financing Trust Fund Contribution	\$5.00 May Be Added to Fees
Zip Country	Zip	Country		or intangible tax under s 199.032,
25	29	30	Florida Statutes Y	es No
9. Name and Address of Curr	rent Registered Agent	81 Name	10. Name and Address of New	Hedistelen Water
		11		
GOHL, HIRJI D.		82 Street	Address (P.O. Box Number is Not Accept	lable)
8082 WELLSMERE CIRCLE		83		
ORLANDO FL 32835		84 City		85 Zip Code
*************************************		1. 1. 1		FL []
or registered agent, or both, in the State of Fig familiar with, and accept the obligations of, Se	ection 607.0505, Florida Statute	es. NOTE: Registered Agent signature r	equired when reinstating!	DATE
or registered agent, or both, in the State of Fi familiar with, and accept the obligations of, Se GNATURE Signature, typed or printed name of registered as	gent and title if applicable. gent AND DIRECTORS	NOTE: Registered Agent signature r	equired when reinstating!	DAYE DEFICERS AND DIRECTORS IN 12
or registered agent, or both, in the State of Fire familiar with, and accept the obligations of, Se GNATURE Signature, typed or printed name of registered agent. OFFICERS A	ection 607.0505, Florida Statute	NOTE: Registered Agent signature r 13. 1.1 TITLE	equired when reinstating!	DAYE DEFICERS AND DIRECTORS IN 12
or registered agent, or both, in the State of Fire familiar with, and accept the obligations of, Scandard Signature, typed or printed name of registered agent. OFFICERS A LE PSD GOHIL, HIRJI D.	gent and title if applicable. GAND DIRECTORS	NOTE: Registered Agent signature r 13. 1.1 TITLE 12 NAME	equired when reinstating!	DAYE OFFICERS AND DIRECTORS IN 12 Change Addi
or registered agent, or both, in the State of First familiar with, and accept the obligations of, Standard Temperature, typed or protect name of registered as OFFICERS ALE GOHIL, HIRJI D. 8082 WELLSMERE CIRCLE ON AND ST	gent and title if applicable. GAND DIRECTORS	NOTE: Registered Agent signature r 13. 1.1 TITLE	equired when reinstating!	DAYE OFFICERS AND DIRECTORS IN 12 Change Addi
or registered agent, or both, in the State of First familiar with, and accept the obligations of, Standard Research Standard Research Rese	gent and title if applicable. GAND DIRECTORS	NOTE: Registered Agent signature r 13. 1.1 TillLE 12 NAME 1.3 STREET ADDRESS	equired when reinstating!	DAYE OFFICERS AND DIRECTORS IN 12 Change Addi
or registered agent, or both, in the State of First familiar with, and accept the obligations of, Standard Registered as OFFICERS A STANDARDS OFFICERS A STANDARDS OFFICERS A STANDARDS OF LANDO FL	ection 607.0505, Fiorida Statute gent and title if applicable. AND DIRECTORS DELETE	NOTE: Registered Agent signature r 13. 1.1 TiTLE 12 NAME 1.3 STREET ADDRESS 1.4 CITY - ST - ZIP	equired when reinstating!	DAYE DEFICERS AND DIRECTORS IN 12 Change B Addi
or registered agent, or both, in the State of First familiar with, and accept the obligations of, Standard Registered as OFFICERS A STANDARDS OFFICERS A STANDARDS OFFICERS A STANDARDS OFFICERS OFFICERS A STANDARDS OFFICERS A STANDARDS OFFICERS A STANDARD OFFICERS A STANDARDS OFFICERS A STANDARDS OFFICERS A STANDARDS OFFICERS A STANDARD OFFICERS OF A STANDARD OFFICERS OFFI OFFI OFFI OFFI OFFI OFFI OFFI OFF	ection 607.0505, Fiorida Statute gent and title if applicable. AND DIRECTORS DELETE	NOTE: Registered Agent signature r 13. 1.1 TITLE 12 NAME 1.3 STREET ADDRESS 1.4 CITY-ST-ZIP 2.1 TITLE 22 NAME 23 STREET ADDRESS	equired when reinstating!	DAYE DEFICERS AND DIRECTORS IN 12 Change B Addi
or registered agent, or both, in the State of Fire familiar with, and accept the obligations of, Scandard Registered agent, or protect name of registered agent. OFFICERS A BEET ADDRESS ORLANDO FL LE ME ME HEET ADDRESS Y-S1-ZIP	GOTICAL SUCTIONARY WAS AUTHOR ection 607.0505, Florida Statute gent and tile if applicable from the process of	NOTE: Registered Agent signature r 13. 1.1 TITLE 12 NAME 1.3 STREET ADDRESS 1.4 CITY-ST-ZIP 2.1 TITLE 2.2 NAME 2.3 STREET ADDRESS 2.4 CITY-ST-ZIP	equired when reinstating!	DAYE DEFICERS AND DIRECTORS IN 12 Change Addi Change Add Change Add
or registered agent, or both, in the State of Fire familiar with, and accept the obligations of, Scandure Signature, typed or printed name of registered as OFFICERS // LE PSD GOHIL, HIRJI D. REET ADDRESS ORLANDO FL LE ME REET ADDRESS (Y-ST-ZIP) LE ME	ection 607.0505, Fiorida Statute gent and title if applicable. AND DIRECTORS DELETE	NOTE: Registered Agent signature r 13. 1.1 TITLE 12 NAME 1.3 STREET ADDRESS 1.4 CITY-ST-ZIP 2.1 TITLE 22 NAME 23 STREET ADDRESS	equired when reinstating!	DAYE DEFICERS AND DIRECTORS IN 12 Change Addi Change Add Change Add
or registered agent, or both, in the State of Fire familiar with, and accept the obligations of, Scandard Signature, typed or printed name of registered agent. OFFICERS // Signature, typed or printed name of registered agent. OFFICERS // PSD GOHIL, HIRJI D. 8082 WELLSMERE CIRCLE ORLANDO FL IE ME REEL ADDRESS (Y-S1-ZIP) LE MF	GOTICAL SUCTIONARY WAS AUTHOR ection 607.0505, Florida Statute gent and title if applicable. AND DIRECTORS DELETE	NOTE: Registered Agent signature r 13. 1.1 TillE 12 NAME 1.3 STREET ADDRESS 1.4 CITY-ST-ZIP 2.1 TITLE 22 NAME 23 STREET ADDRESS 24 CITY-ST-ZIP 3.1 TITLE	equired when reinstating!	DAYE DEFICERS AND DIRECTORS IN 12 Change 内 Addi
or registered agent, or both, in the State of Fire familiar with, and accept the obligations of, Scandure, typed or protect name of registered agent. OFFICERS // LE PSD GOHIL, HIRJI D. 8082 WELLSMERE CIRCLE ORLANDO FL LE ME REET ADDRESS (Y-ST-ZIP) LE MMF REET ADDRESS	GOTICAL SUCTIONARY WAS AUTHOR ection 607.0505, Florida Statute gent and title if applicable. AND DIRECTORS DELETE	NOTE: Registered Agent signature r 13. 1.1 TITLE 12 NAME 1.3 STREET ADDRESS 1.4 CITY-ST-ZIP 2.1 TITLE 22 NAME 23 STREET ADDRESS 2.4 CITY-ST-ZIP 3.1 TITLE 32 NAME	equired when reinstating!	DAYE DEFICERS AND DIRECTORS IN 12 Change Addi Change Add Change Add
or registered agent, or both, in the State of Fire familiar with, and accept the obligations of, Scandure. Signature, typed or printed name of registered agent. OFFICERS // PSD GOHIL, HIRJI D. 8082 WELLSMERE CIRCLE ORLANDO FL LE MME REET ADDRESS (Y-ST-ZIP) LE MMI REET ADDRESS (Y-ST-ZIP) LE MMI REET ADDRESS (Y-ST-ZIP)	GOTICAL SUCTIONARY WAS AUTHOR ection 607.0505, Florida Statute gent and title if applicable. AND DIRECTORS DELETE	NOTE: Registered Agent signature r 13. 1.1 TILE 12 NAME 1.3 STREET ADDRESS 1.4 CITY-ST-ZIP 2.1 TITLE 22 NAME 23 STREET ADDRESS 2.4 CITY-ST-ZIP 3.1 TITLE 32 NAME 3.3 STREET ADDRESS 3.4 DITY-ST-ZIP 4.1 TITLE	equired when reinstating!	DAYE DEFICERS AND DIRECTORS IN 12 Change Addi Change Addi
or registered agent, or both, in the State of Fire familiar with, and accept the obligations of, Scanding Translations of	ection 607.0505, Fiorida Statute gent and tole it applicable. r AND DIRECTORS DELETE	NOTE: Registered Agent signature r 13. 1.1 TILE 12 NAME 1.3 STREET ADDRESS 1.4 CITY-ST-ZIP 2.1 TITLE 22 NAME 23 STREET ADDRESS 2.4 CITY-ST-ZIP 3.1 TITLE 32 NAME 3.3 STREET ADDRESS 3.4 CITY-ST-ZIP 4.1 TITLE 4.2 NAME	equired when reinstating!	DAYE DEFICERS AND DIRECTORS IN 12 Change Addi Change Addi
or registered agent, or both, in the State of Fire familiar with, and accept the obligations of, Scandard Signature, typed or printed name of registered agent. OFFICERS // PSD GOHIL, HIRJI D. 8082 WELLSMERE CIRCLE ORLANDO FL ILE IMME REET ADDRESS IY-ST-ZIP ILE IMME REET ADDRESS IY-ST-ZIP ILE IMME REET ADDRESS IY-ST-ZIP ILE IMME	ection 607.0505, Fiorida Statute gent and tole it applicable. r AND DIRECTORS DELETE	NOTE: Registered Agent signature r 13. 1.1 TILE 12 NAME 1.3 STREET ADDRESS 1.4 CITY-ST-ZIP 2.1 TITLE 22 NAME 23 STREET ADDRESS 2.4 CITY-ST-ZIP 3.1 TITLE 32 NAME 3.3 STREET ADDRESS 3.4 DITY-ST-ZIP 4.1 TITLE 4.2 NAME 4.3 STREET ADDRESS	equired when reinstating!	DAYE DEFICERS AND DIRECTORS IN 12 Change Addi Change Addi
or registered agent, or both, in the State of Fire familiar with, and accept the obligations of, Scandure. Signature, typed or printed name of registered agent. OFFICERS // LE PSD GOHIL, HIRJI D. 8082 WELLSMERE CIRCLE ORLANDO FL LE ME ME REE1 ADDRESS IY-ST-ZIP LE MMF REET ADDRESS IY-ST-ZIP LE MMF REET ADDRESS IY-ST-ZIP LE MME REET ADDRESS IY-ST-ZIP LE MME REET ADDRESS IY-ST-ZIP LE MME REET ADDRESS IY-ST-ZIP	GOTICA SUCTION OF AND DIRECTORS DELETE DELETE DELETE	NOTE: Registered Agent signature r 13. 1.1 TILE 12 NAME 1.3 STREET ADDRESS 1.4 CITY-ST-ZIP 2.1 TITLE 22 NAME 23 STREET ADDRESS 2.4 CITY-ST-ZIP 3.1 TITLE 32 NAME 3.3 STREET ADDRESS 3.4 DITY-ST-ZIP 4.1 TITLE 4.2 NAME 4.3 STREET ADDRESS 4.4 CITY-ST-ZIP 4.1 TITLE 4.2 NAME 4.3 STREET ADDRESS 4.4 CITY-ST-ZIP	equired when reinstating!	DAYE DEFICERS AND DIRECTORS IN 12 Change Addi Change Addi Change Addi
or registered agent, or both, in the State of Fire familiar with, and accept the obligations of, Scandard Translations of Translations of, Scandard Tr	ection 607.0505, Fiorida Statute gent and tole it applicable. r AND DIRECTORS DELETE	NOTE: Registered Agent signature r 13. 1.1 TILE 12 NAME 1.3 STREET ADDRESS 1.4 CITY-ST-ZIP 2.1 TITLE 22 NAME 23 STREET ADDRESS 2.4 CITY-ST-ZIP 3.1 TITLE 32 NAME 3.3 STREET ADDRESS 3.4 DITY-ST-ZIP 4.1 TITLE 4.2 NAME 4.3 STREET ADDRESS	equired when reinstating!	DAYE DEFICERS AND DIRECTORS IN 12 Change Addi Change Addi Change Addi
or registered agent, or both, in the State of Fire familiar with, and accept the obligations of, Scandard Translature, typed or pricted name of registered agent. OFFICERS A PSD GOHIL, HIRJI D. 8082 WELLSMERE CIRCLE ORLANDO FL ILE MARE REEL ADDRESS IY-SI-ZIP ILE MARE REET ADDRESS IY-SI-ZIP ILE MARE REEL ADDRESS IX-SI-ZIP ILE	GOTICA SUCTION OF AND DIRECTORS DELETE DELETE DELETE	NOTE: Registered Agent signature r 13. 1.1 Tille 12 NAME 1.3 STREE1 ADDRESS 1.4 CITY-ST-ZIP 2.1 TITLE 22 NAME 23 STREET ADDRESS 24 CITY-ST-ZIP 3.1 TITLE 32 NAME 3.3 STREET ADDRESS 3.4 CITY-ST-ZIP 4.1 TITLE 4.2 NAME 4.3 STREET ADDRESS 4.4 CITY-ST-ZIP 5.1 TITLE 5.1 TITLE	equired when reinstating!	DAYE DEFICERS AND DIRECTORS IN 12 Change Addi Change Addi Change Addi
or registered agent, or both, in the State of Fire familiar with, and accept the obligations of, Scandard Translature, typed or protect name of registered agent. OFFICERS A PSD GOHIL, HIRJI D. 8082 WELLSMERE CIRCLE ORLANDO FL ILE MARE REEL ADDRESS IN-ST-ZIP	GOTICA SUCTION OF AND DIRECTORS DELETE DELETE DELETE	NOTE: Registered Agent signature r 13. 1.1 Tille 12 NAME 1.3 STREE1 ADDRESS 1.4 CITY-ST-ZIP 2.1 TITLE 22 NAME 23 STREET ADDRESS 24 CITY-ST-ZIP 3.1 TITLE 32 NAME 3.3 STREET ADDRESS 3.4 DITY-ST-ZIP 4.1 TITLE 4.2 NAME 4.3 STREET ADDRESS 4.4 CITY-ST-ZIP 5.1 TITLE 5.2 NAME	equired when reinstating!	DAYE DEFICERS AND DIRECTORS IN 12 Change Addi Change Addi Change Addi Change Addi
or registered agent, or both, in the State of Fire familiar with, and accept the obligations of, Scanding Technology (Scanding Sprature, typed or printed name of registered agent.) Signature, typed or printed name of registered agent. PSD GOHIL, HIRJI D. 8082 WELLSMERE CIRCLE ORLANDO FL ITHE MAME INSEL ADDRESS ITY-ST-ZIP ITE AMME IREET ADDRESS ITY-ST-ZIP ITE ITE ITE ITE ITE ITE ITE I	GOTICA SUCTION OF AND DIRECTORS DELETE DELETE DELETE	NOTE: Registered Agent signature r 13. 1.1 Tille 12 NAME 1.3 STREEL ADDRESS 1.4 CITY-ST-ZIP 2.1 TITLE 22 NAME 23 STREET ADDRESS 24 CITY-ST-ZIP 3.1 TITLE 32 NAME 33 STREET ADDRESS 3.4 DITY-ST-ZIP 4.1 TITLE 4.2 NAME 4.3 STREET ADDRESS 4.4 CITY-ST-ZIP 5.1 TITLE 5.2 NAME 5.3 STREET ADDRESS	equired when reinstating!	DAYE DEFICERS AND DIRECTORS IN 12 Change Addi Change Addi Change Addi Change Addi Change Addi
or registered agent, or both, in the State of Fire familiar with, and accept the obligations of, Scientific Technology (Control of the State of Fire familiar with, and accept the obligations of, Scientific Technology (Control of the State of Fire familiar with, and accept the obligations of, Scientific Technology (Control of the State of Fire familiar with, and accept the obligations of, Scientific Technology (Control of the State of Fire familiar with, and accept the obligations of, Scientific Technology (Control of the State of Fire familiar with, and accept the obligations of, Scientific Technology (Control of Fire familiar with, and accept the obligations of Fire familiar with accept the obligations of Fire familiar with accept the obligation of Fire	COTION SUCTION OF AN AUTOMOTION OF AND DIRECTORS DELETE DELETE DELETE DELETE	NOTE: Registered Agent signature r 13. 1.1 Tille 12 NAME 1.3 STREEL ADDRESS 1.4 CITY-ST-ZIP 2.1 TITLE 22 NAME 23 STREET ADDRESS 24 CITY-ST-ZIP 3.1 TITLE 32 NAME 33 STREET ADDRESS 34 CITY-ST-ZIP 4.1 TITLE 42 NAME 4.3 STREET ADDRESS 4.4 CITY-ST-ZIP 5.1 TITLE 52 NAME 53 STREET ADDRESS 5.4 CITY-ST-ZIP 5.1 TITLE 52 NAME 53 STREET ADDRESS 5.4 CITY-ST-ZIP	equired when reinstating!	DAYE DEFICERS AND DIRECTORS IN 12 Change Addi Change Addi Change Addi Change Addi
Signature, typed or printed name of registered as 2. OFFICERS A TILE PSD AME GOHIL, HIRJI D. TREET ADDRESS 8082 WELLSMERE CIRCLE	COTION SUCTION OF AN AUTOMOTION OF AND DIRECTORS DELETE DELETE DELETE DELETE	13. 1.1 Tille 12 NAME 1.3 STREEL ADDRESS 1.4 CITY-ST-ZIP 2.1 TITLE 22 NAME 23 STREET ADDRESS 24 CITY-ST-ZIP 3.1 TITLE 32 NAME 33 STREET ADDRESS 34 DITY-ST-ZIP 4.1 TITLE 42 NAME 4.3 STREET ADDRESS 4.4 CITY-ST-ZIP 5.1 TITLE 52 NAME 5.3 STREET ADDRESS 5.4 CITY-ST-ZIP 6.1 TITLE 6.1 TITLE	ADDITIONS/CHANGES TO O	DAYE DEFICERS AND DIRECTORS IN 12 Change SA Addit Change Addit Change Addit Change Addit Change Addit

SIGNATURE:

ID TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Daytine Phone #