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

**PROFIT** FLORIDA DEPARTMENT OF STATE **CORPORATION** Sandra B. Mortham ANNUAL REPORT Secretary of State 1998 **DIVISION OF CORPORATIONS DOCUMENT #** (1)

## **FILED** Feb 11 1998 8:00am Secretary of State

|   | GADSDEN INVESTMENT, INC.   | (.,  |                                 |                              |  | <u> </u>  |
|---|--|--|---------------------------------|------------------------------|--|---|
| Princi  | pal Place of Business  | Mailing Address  |                                 |                              | <u> </u>   |   |
| 322 EAST JEFFERSON STREET 322 EAST JEFFERSON ST |  |  | STREET                          |                              |  |   |
|   | NCY FL 32351   | OUNICY FL 32351  |                                 | DO NOT WRITE IN THIS SPACE   |  |   |
|   |  |  |                                 |                              | 3. Date Incorporated or Qualified  | IS SI ACL   |
|   |  |  |                                 |                              | 09/24/1992   |   |
| 2. Pri  | ncipal Place of Business   | I Place of Business 2a. Mailing Address  |                                 |                              | 4. FEI Number  | Applied For   |
| 21  |  | 26   |                                 |                              | 59-3149459   | Not Applicable  |
| Şυ  | uite, Apt. #, etc. Suite, Apt. #, etc.   |  |                                 | ····                         |  | \$8.75 Additional                                     |
| 22  | 27   |  |                                 |                              | 5. Certificate of Status Desired   | Fee Required  |
| CH  | / & State City & State   |  |                                 |                              | 6. Election Campaign Financing   | \$5.00 May Be   |
| 23  | 28   |  |                                 |                              | Trust Fund Contribution  | Added to Fees   |
| Zip   | Country  | Zip Cou  |                                 | у                            | 8. This corporation owes or has paid the current year Intangible                                     |   |
| 24  | 25   |  |                                 |                              | Personal Property Tax due June 30.  Yes No   |   |
|   | 9. Name and Address of Current   | Registered Agent   |                                 | ,                            | 10. Name and Address of New Registere  | ed Agent  |
|   | Patel, Dhansukh <b>b</b> hai   |  | 81                              | Namo                         |  |   |
|   | 322 E JEFFERSON STREET   |  | 82                              | Street Add                   | eet Address (P.O. Box Number is Not Acceptable)  |   |
|   | QUINCY FL 32351  |  |                                 |                              |  |   |
|   |  |  | B3                              | 1                            |  |   |
|   |  |  | 84                              | City                         |  | 85 Zip Code   |
|   |  |  |                                 |                              | F  |   |
| 11. Pi  | ursuant to the provisions of Sections 607.0502<br>fice or registered agent, or both, in the State of<br>sent Lem familiar with, and accept the obligations.  | ' and 607.1508, Florida Statu<br>of Florida. Such change was<br>tions of Soction 607.0505. E | ites, the above<br>authorized b | e-named cor<br>y the corpora | poration submits this statement for the purpose<br>ation's board of directors. I hereby accept the a | e of changing its registered ppointment as registered |
|   | ATURE  |  |                                 |                              |  |   |
| -10   | Signature, typed or printed name of registered agont   |  |                                 | ont signature requ           | ired when reinstating) DATE  |   |
| 12.   | OFFICERS AND   | DELETE   | 13.                             | ···                          | ADDITIONS/CHANGES TO OFFICERS A  |   |
| NAME  | PATEL RAJENDRAKUMAR  | ☐ DECEIE   | 1.1 TITLE                       |                              |  | ☐ Change ☐ Addition                                   |
|   | AAA 2 422222AA4 A  |  | 1.2 NAME                        |                              |  |   |
| STREET  | ALIILIAN BI  |  | 1.3 STREET ADDRESS              |                              |  | ļ   |
| CITY-ST<br>TITLE                                | STD  | DELETE   | 1.4 CITY - :<br>2.1 TITLE       | ST- ZIP                      |  | Change I Addition                                     |
| NAME  | PATEL NIRUBEN  | - Dittit   | 2.1 TITLE<br>2.2 NAME           | - 1                          |  | Change Addition                                       |
| STREET A  |  | AAA E IEEEEAAAN ATAREE   |                                 | 4000000                      |  |   |
| CITY-ST   | ALIBEAU PI   | 2.3 STREET ADDR  |                                 |                              |  |   |
| TITLE   |  |  | 3.1 TITLE                       | 51-ZIP                       |  | Change Addition                                       |
| NAME  |  | PATEL DHANSUKHBHAI P   |                                 |                              |  | Change Dividing                                       |
| STREET A  | AGG C ICCCCOCON GENERY   |  | 3.3 STREET                      | ADDRESS                      |  |   |
| CITY-ST   | ALIILIAU PI  |  | 3.4. CITY-                      | - 1                          |  |   |
| TITLE   | DELETE   |  | 4.1 TITLE                       | 51-ZIP                       |  | Change Addition                                       |
| NAME  |  |  | 4. 2 NAME                       |                              |  | C Change C Nacinari                                   |
| STREET A  |  |  | 4.3 STREET                      | ADDRESS                      |  |   |
| CITY-ST-  |  |  | 4.4 CITY - S                    |                              |  |   |
| TITLE   |  | DELETE   | 5.1 TABLE                       |                              |  | Change Addition                                       |
| NAME  |  |  | 5.2 NAME                        |                              |  |   |
| STREET A  | ODRESS   |  | 5.3 STREET                      | ADDRESS                      |  |   |
| CITY-ST-  | l P  |  | 5.4 CITY-S                      | i                            |  |   |
| TITLE   | The second secon |  | 6.1 TITLE                       |                              | WILLEY   | Change Addition                                       |
| NAME  |  |  | 6.2 NAME                        |                              |  | · - · · ·   |
| STREET A  | DORESS   |  | 6.3 STAEET                      | ADDRESS                      |  |   |
| CITY-ST-  | ZIP  |  | 6.4 C(TY - S                    |                              |  |   |

14. 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 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.

9/Elar Camprell OLOR