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

PROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P93000060763 (8)

A-CHALET CONSTRUCTION INC.

FILED Feb 03 1997 8:00am Secretary of State



Principal Place of Business Mailing Address 2550 SUNSET POINT RD 2550 SUNSET POINT RD CLEARWATER FL 34625 CLEARWATER FL 34625-15									
						3. Date Incorporated or Qualified		ate of Last Re	eport
2. Principal Place of Business 2a, Mailing Address						08/27/1993 4. FEI Number	103/0	07/1996	oplied For
21	26					59-3202870			ot Applicable
Suite, Ap	it. #, etc.	Suite, Apt #, etc.		••••			П	\$8.75	
22	2 27					5. Certificate of Status Desired		Fee Re	quired
City & Sta	ato	City & State				8. Election Campaign Financing		\$5.00	
23 Zip	Country	28	1 00	untry		Trust Fund Contribution	<u>. Ll</u>	Added t	***************************************
24	25	29	30	an ILI Y		This corporation has liability for Florida Statutes		tax under s. X No	. 199.032,
24]	g, Name and Address of Cui		1901	Γ		10. Name and Address of New R			
FA	RID, ASHRAF S			81	Name			··· - · · · · · · · · · · · · · · · · ·	
	50 SUNSET POINT RD			82	Street Add	fress (P.O. Box Number is Not Accepta	hle)		
CLEARWATER FL 34625				Speet Audress (F.O. Box Number is Not Acceptable)					
				83					
				84	City			85 Zip (Code
,						poration submits this statement for the	FL		
office or agent. I SIGNATURE	I am familiar with, and accept the of	oligations of, Section 607.0505,	Florida Sta	lutes), 	ation's board of directors. I hereby acce	DATE	ointment as	registered
12.		AND DIRECTORS	13.			ADDITIONS/CHANGES TO OFFI	CERS ANI	DIRECTOR	IS IN 12
TITLE	D	DELETE	117	ITLE				Change	Addition
NAME	FARID, ASHRAF S		1.2 N		ما	mme e e commune de la	Δ . μ	1554	
STREET ADDRESS	1		1		ADDRESS 2	.556 SWEETGUM W LEARWATER, FL	7 L	7001	
CITY-ST-ZIP	CLEARWATER FL 34819	☐ DELETE		ITY-S	T-ZIP C	LEARWATER, FL	376	Change	Addition
TITLE		L.J Utitit	2.1 Ti 2.2 N		-			□ Citalige	(Addition
NAME STREET ADDRESS					ADDRESS				
CITY - ST-ZIP	°		- 1		ST-ZIP				
TITLE		DELETE	3.1 7		71-211			Change	Addition
NAME			32 N	IAME				**	
STREET ADDRESS	s		335	TREET	ADDRESS				
CITY-ST-ZIP			3.4. (CITY - S	ST-ZIP				· ·
TITLE		DELETE	4.1 (ITLE				Change	Addit
NAME			4.21	NAME					
STREET ADDRESS	s		4.3 S	TREET	ADDRESS				
CITY-ST-ZIP				ITY-S	T-21P				
TITLE		DELETE	5.1 Ti		}			Change	A
NAME				IAME					*
STREET ADDRESS	S		1		ADDRESS				*
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NAME CIDEET ADODESS	c		i i	AME TOCCT	*DOGECC				•
STREET ADDRESS	9				ADDRESS				
CITY-ST-ZIP	1		0.40	ITY-S	1-411				

14. I do 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 supplier annual report is true and accurate and that my signature shall have the same legal effect as if made under oath; this is a man 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 thanged, on an attestment with an address.

SIGNATURE:

ASHRAF FARID