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

PROFIT CORPORATION ANNUAL REPORT

1998

CITY-ST-ZIP



FLORIDA DEPARTMENT OF STATE

FILED

Mar 17 1998 8:00am

Secretary of State

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P9400007519 (9)

SARASOTA INVESTMENT & TRADING CORPORATION

Principal Place of Business		Mailing Address			iili deili daili ibool dilat ilolo läht isbt	
501 REMBRANT DRIVE		501 REMBRANT DRIVE				
OSPREY FL 34229		OSPREY FL 34229		DO NOT WRITE	: IN THIS SPACE	
					3. Date Incorporated or Qualified	IN THIS STACE
					01/21/1994	
2, Principal P	lace of Business	2a, Mailing Addr	ess		4. FEI Number	Applied For
21		26			34-8482116	Not Applicable
Suite, Apt. #, etc.		Suite, Apt. #, etc.			\$8.75 Additional	
22		27		5. Certificate of Status Desired	Fee Required	
City & State		City & State		6. Election Campaign Financing	\$5.00 May Be	
23		28			Trust Fund Contribution	Added to Fees
Zip	Country	Zip	Cou	intry	8. This corporation owes or has pa	— · — ·
24	25 25 Name and Address of Curr	29	30		Personal Property Tax due June	
100.00		ent negistered Agent		81 Name	10. Name and Address of New Re	gistered Agent
IBRAHIM, GAMILA S				VI Namo		
	1 REMBRANT DRIVE PREY FL 34229			82 Street Addre	ess (P.O. Box Number is Not Acceptat	ole)
US	PHET FL 34229			63		
				84 City		FL 85 Zip Code
11. Pursuant	to the provisions of Sections 607.0	502 and 607.1508. Florid	da Statutes, the al	pove-named corpo	oration submits this statement for the p	
office or n	egistered agent, or both, in the Stam familiar with, and accept the ob-	ate of Florida. Such chan	ide was authorized	d by the corporation	on's board of directors. I hereby accep	ot the appointment as registered
•	m tammar with, and accept the ob-	ilgations of, section our.	0505, Fiorida Stat	utes.		
SIGNATURE	Signature, typed or printed name of registered	agent and title if applicable	(NOTE Registered	Agent signature require	d when reinstating)	DATE
12.	OFFICERS A	AND DIRECTORS	13.		ADDITIONS/CHANGES TO OFFICE	ERS AND DIRECTORS IN 12
TITLE	D	☐ DE	LETE 1.1 TO	ſL€		Change Addition
NAME	ibrahim, gamila s		1.2 N/	ME		
STREET ADDRESS	501 REMBRANT DRIVE		1.3 ST	REET ADDRESS		
CITY-ST-ZIP	OSPREY FL 34229			TY-ST-ZIP		
TITLE	<u>C</u>	☐ DE	ELETE 2.1 TI	ILE		☐ Change ☐ Addition
NAME	IBRAHIM, IBRAHIM M.		2.2 N/	ME		•
STREET ADDRESS	501 REMBRANDT DRIVE		2.3 ST	REET ADDRESS		
CITY-ST-ZIP	OSPERY FL			ITY-ST-ZIP		
TITLE		□ DE			: 	· L. Change L. Addition
NAME			32 N	į.		
STREET ADDRESS				REET ADDRESS		
CITY-ST-ZIP TITLE		□ DE		TY-\$T-ZIP		☐ Change ☐ Addition
NAME		VL	4.2 N			Change Zoonion
STREET ADDRESS				REET ADDRESS		
CITY-ST-ZIP				TY-ST-ZIP		
TITLE		DE				Change Addition
NAME			5.2 NA			em anadita
STREET ADDRESS				REET ADDRESS		
CITY-ST-ZIP				TY-ST-ZIP		
TITLE	·	☐ DE				Change Addition
NAME			6.2 NA	1		•
STREET ADORESS				REET ADDRESS		:

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 trusted 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 sylpt an address,