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May 01 1997 8:00am
Secretary of State

PROFIT
CORPORATION
ANNUAL REPORT
1997



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P94000019564 (1)

1. Corporation Name
INTERNATIONAL ENTERTAINMENT GROUP OF ORLANDO, IN
C.

Principal Place of Business

1685 LEE RD
SUITE #10
WINTER PARK FL 32788
US

Mailing Address

P O BOX 2605
WINTER PARK FL 32780-2605
US



2. Principal Place of Business

21 1301 CATHERINE ST

Suite, Apt. #, etc.

22 203

City & State

23 ORLANDO FL

Zip

24 32801

Country

25 ORANGE

2a. Mailing Address

26 P O BOX

Suite, Apt. #, etc.

27 692225

City & State

28 ORLANDO FL

Zip

29 32869

Country

30 ORANGE

3. Date Incorporated or Qualified

03/09/1994

3a. Date of Last Report

04/11/1996

4. FEI Number

59-3228841

Applied For

Not Applicable

5. Certificate of Status Desired

☐ \$8.75 Additional
Fee Required

6. Election Campaign Financing
Trust Fund Contribution

☐ \$5.00 May Be
Added to Fees

8. This corporation has liability for intangible tax under s. 199.032,
Florida Statutes

☐ Yes ☒ No

9. Name and Address of Current Registered Agent

MNAYARJI, GABRIEL
8594 TANSY DRIVE
ORLANDO FL 32819

10. Name and Address of New Registered Agent

81 Name

GABRIEL MNAYARJI

82 Street Address (P.O. Box Number is Not Acceptable)

1301 CATHERINE ST. #203

83

84 City

ORLANDO

FL

85 Zip Code

32801

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

GABRIEL MNAYARJI

4-27-97

DATE

12. OFFICERS AND DIRECTORS

TITLE D ☐ DELETE

NAME MNAYARJI, GABRIEL

STREET ADDRESS 8594 TANSY DRIVE

CITY-ST-ZIP ORLANDO FL 32819

TITLE D ☒ DELETE

NAME JAMMAL, EMILE

STREET ADDRESS 307 MURPHY ROAD

CITY-ST-ZIP WINTER SPRINGS FL 32708

TITLE D ☒ DELETE

NAME JAMMAL, TOUFIC

STREET ADDRESS 3520 W. LINA LANE

CITY-ST-ZIP APOPKA FL 32703

TITLE D ☒ DELETE

NAME BUSHRUI, DAN

STREET ADDRESS 1008 BRADFORD DRIVE

CITY-ST-ZIP WINTER PARK FL 32782

TITLE D ☐ DELETE

NAME TATIANA S. TURCHANOVA

STREET ADDRESS 1301 CATHERINE ST. #203

CITY-ST-ZIP ORLANDO FL 32801

TITLE ☐ DELETE

NAME

STREET ADDRESS

CITY-ST-ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE ☒ Change ☐ Addition

1.2 NAME

GABRIEL MNAYARJI

1.3 STREET ADDRESS

1301 CATHERINE ST. #203

1.4 CITY-ST-ZIP

ORLANDO FL 32801

2.1 TITLE ☐ Change ☐ Addition

2.2 NAME

2.3 STREET ADDRESS

2.4 CITY-ST-ZIP

3.1 TITLE ☐ Change ☐ Addition

3.2 NAME

3.3 STREET ADDRESS

3.4 CITY-ST-ZIP

4.1 TITLE ☐ Change ☐ Addition

4.2 NAME

4.3 STREET ADDRESS

4.4 CITY-ST-ZIP

5.1 TITLE ☐ Change ☒ Addition

5.2 NAME

5.3 STREET ADDRESS

5.4 CITY-ST-ZIP

6.1 TITLE ☐ Change ☐ Addition

6.2 NAME

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

600002165586

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***165.00

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 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.

SIGNATURE

SIGNATURE

SIGNATURE

407-898-1611

CR2E034 (9/96)