

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

PROFIT CORPORATION  
ANNUAL REPORT  
**1996**



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

**DOCUMENT # P94000045295 (0)**

1. Corporation Name

**2421 AVENUE D PROPERTIES, INC.**



Principal Place of Business

**941 NE 19TH AVENUE STE. 301  
FORT LAUDERDALE FL 33304**

Mailing Address

**941 NE 19TH AVENUE STE. 301  
FORT LAUDERDALE FL 33304**

2. Principal Place of Business

2a. Mailing Address

21 **9941 SW 4th Street**

26 **9941 SW 4th Street**

22 Suite, Apt. #, etc.

27 Suite, Apt. #, etc.

23 City & State

27 City & State

**Plantation FL**

**Plantation FL**

24 Zip

25 Country

29 Zip

30 Country

**33324**

**USA**

**33324**

**33324**

9. Name and Address of Current Registered Agent

3. Date Incorporated or Qualified

**06/13/1994**

3a. Date of Last Report

**06/12/1995**

4. FEI Number

**65-0499216**

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

10. Name and Address of New Registered Agent

**HASAN, OSAMAH  
941 NE 19TH AVENUE STE. 301  
FORT LAUDERDALE FL 33304**

81 Name

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

83

84 City

**FL**

85 Zip Code

11. Pursuant to the provisions of Sections 607.0562 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 of Registered Agent (to be printed in block letters) \_\_\_\_\_ Date \_\_\_\_\_

12. OFFICERS AND DIRECTORS

TITLE  DELETE  
NAME **D KAHOOK, NOFAL**  
STREET ADDRESS **2400 E COMMERCIAL BLVD STE 204**  
CITY-STATE-ZIP **PLANTATION FL**

TITLE  DELETE  
NAME  
STREET ADDRESS  
CITY-STATE-ZIP

TITLE  DELETE  
NAME  
STREET ADDRESS  
CITY-STATE-ZIP

TITLE  DELETE  
NAME  
STREET ADDRESS  
CITY-STATE-ZIP

TITLE  DELETE  
NAME  
STREET ADDRESS  
CITY-STATE-ZIP

TITLE  DELETE  
NAME  
STREET ADDRESS  
CITY-STATE-ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

11 TITLE  Change  Addition  
**D/P/ ISIT**  
12 NAME **Kahook, Nofal**  
13 STREET ADDRESS **9941 SW 4th Street**  
14 CITY-STATE-ZIP **Plantation, FL 33324**

21 TITLE  Change  Addition  
**VP**  
22 NAME **Kahook, Muntaha**  
23 STREET ADDRESS **9941 SW 4th Street**  
24 CITY-STATE-ZIP **Plantation, FL 33324**

31 TITLE  Change  Addition  
32 NAME  
33 STREET ADDRESS  
34 CITY-STATE-ZIP

41 TITLE  Change  Addition  
42 NAME  
43 STREET ADDRESS  
44 CITY-STATE-ZIP

51 TITLE  Change  Addition  
52 NAME  
53 STREET ADDRESS  
54 CITY-STATE-ZIP

61 TITLE  Change  Addition  
62 NAME  
63 STREET ADDRESS  
64 CITY-STATE-ZIP

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(a), 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 AND TYPE OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

*Nofal Kahook*

3/6/96

(954) 771-3776

CR2E034 (12/95)