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

PROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

FILED

Sep 12 1997 8:00am

Secretary of State

☐ Change

☐ Addition

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P94000080435 (8)

TAVANA CORP.

CITY-ST-ZIP

TITLE
NAME
STREET ADDRESS

Principal Place of Business 7213 NW 12TH ST. MIAMI FL 33128		Mailing Address 7213 NW 12TH ST. MIAMI FL 33126-1908			
				3. Date Incorporated or Qualified 11/02/1994	3a. Date of Last Report 05/01/1996
2. Principal Place of Business		2a. Mailing Address		4. FEI Number	Applied For
21 Suite Act # etc		Suite Apt. #. etc.		65-0531853	Not Applicable
Suite, Apt. #, etc.		27		5. Certificate of Status Desired	\$8.75 Additional Fee Required
City & State		City & State		6. Election Campaign Financing	\$5.00 May 8e
[23] Zip	Country	[28]	Country	Trust Fund Contribution 8. This corporation has liability for in	
24	25	29	30		Yes No
	ame and Address of Cur			10. Name and Address of New Reg	gistered Agent
BIDGOU, RI			B1 Name		
7213 NW 1			82 Street Add	ress (P.O. Box Number is Not Acceptable)	
MIAMI FL 3	3126		83		
			63		
			84 City		FI 85 Zip Code
office or registere agent. I am familia SIGNATURE	d agent, or both, in the Sta	ale of Horida Such change was digations of, Section 607.0505, F	authorized by the corpora	poration submits this statement for the prition's board of directors. I hereby acceptions the principle of the princip	urpose of changing its registered t the appointment as registered
12.		AND DIRECTORS	13.	ADDITIONS/CHANGES TO OFFIC	
TITLE D	M11	DELFTE	1.1 TITLE		Change Addition
	OLI, REZA J		1.2 NAME		
	NW 12TH ST.		1.3 STREET ADDRESS		
	I FL 33126	The state of the s	1.4 CITY - S1 - ZIP		
TITLE		☐ DELFTE	2.1 Till E		☐ Change ☐ Addition
NAME CYDECY ADDRESS			2.2 NAME		
STREET ADDRESS CITY-ST-2IP			2 3 STREET ADORESS 2. 4 CITY - ST- ZIP		
TITLE		DOLLETE	3.1 TITLE		Change Addition
NAME			3.2 NAME		
STREET ADDRESS			3.3 STREET ADDRESS		
CITY-ST-ZIP			34 CITY-ST-ZIP		
TITLE		☐ DELETE	4.1 TITLE		Change Addition
NAME			4. 2 NAME		
STREET ADDRESS			4.3 STREET ADDRESS		
CITY-ST-ZIP			4.4 CITY-ST-ZIP		
TITLE		☐ DELETE	5.1 TITLE		☐ Change ☐ Addition
NAME			5.2 NAME		
STREET ADDRESS			5.3 STREET ADDRESS		

DELETE

G.1 TITLE

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 suppliemental annual report is true and accurate and that my signature shall have the same logal effect as if made under early that I am an officer or director of the comperation or the receiver of usate 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 intractypical with an address.