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PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

1997

DOCUMENT # P95000062641 (2)

SHAHEEN MARKETING GROUP, INC.

FILED Apr 23 1997 8:00am Secretary of State



| • | of Business | Mailing Address | | *************************************** | | OMILA OPKIO LINKO OIIII O | |
|--|--|---|--|---|---|--------------------------------|------------------------|
| 2350 S DIXIE HW Miami Fl 33133 | γ | 2350 S DIXIE HWY MIAMI FL 33133-2314 | | | | | |
| | | | | | 3. Date Incorporated or Qualified 08/14/1995 | 3e. Date of Last 05/01/1996 | |
| 2. Principal Plac | | 2a, Mailing Address | | | 4. FEI Number | | Applied For |
| 1 520 Sun Ignacio Ave 26 1500 San | | | Lane | cio de | 65-0598781 | | Not Applicable |
| Suite, Apt #, = 2 Suite = 3 | etc | 27 Sorte #2 | | | 6. Certificate of Status Desired | | Additional Required |
| City & State | ا مس | City & State | | | 6. Election Campaign Financing | \$5.0 | O May Be |
| 3 Coral | Gables, FL | 28 Coral Gak | | | Trust Fund Contribution | | d to Fees |
| 7ip 3314(| Country | Zip 33146 | Country | ť | 8. This corporation has liability for it | | ъ. 199.032, |
| | 9 Name and Address of Current | | 30 | ···- | Florida Statutes 10. Name and Address of New Reg | Yes No | |
| | | 11081010100 1130111 | 81 | Name | 10, 112110 0110 1110 | | |
| OFFICE ONLY | | | | | | | |
| MIAMI FL 33133 | | | 82 | 82 Street Address (P.O. Box Number is Not Acceptable) | | | |
| mwani | 1 - 44144 | | 83 | | | | |
| | | | | - | | Tast | - Cod- |
| | | | 84 | City | | FL 85 Zi | p Code |
| SIGNATURE & | paton, typed or printed name of registered agent | | Registered Age | ent signature requin | ed when reinstating) | DATE | |
| 12. | OFFICERS AND | | 13. | ···· | ADDITIONS/CHANGES TO OFFIC | | |
| , , | DPTS | DELETE | 1.1 TITLE | | | Change | e 🔲 Additio |
| IAME | SHAHEEN, LISA | | 1.2 NAME | | | | |
| | | | | 9. | nameen, Lisa | | |
| 1 1 | 2350 S DIXIE HWY | | 1.3 STREET | ADDRESS 15 | nameer, Lish 120 San Ignacio Are, | Suite # 3. | |
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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 AND TYPED OR PRINTED NAME OF SKONING OFFICER OR DIRECTOR

Date Dayt me Phone #