

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

**FILED**  
**Aug 07 1998 8:00am**  
**Secretary of State**

PROFIT CORPORATION ANNUAL REPORT 1998



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

DOCUMENT # P97000053191  
 1. Corporation Name  
**Prudential Business Group, Inc.**

Principal Place of Business: **4109 Land O'Lakes Blvd. Land O'Lakes, FL 34639**  
 Mailing Address: **P.O. Box 1190 Riverview, FL 33568**

DO NOT WRITE IN THIS SPACE  
 3. Date Incorporated or Qualified **06-16-97**

2. Principal Place of Business: **4109 Land O'Lakes Blvd.**  
 2a. Mailing Address: **P.O. Box 1190**  
 22. Suite Apt. #, etc.  
 23. City & State: **Land O'Lakes, FL.**  
 24. Zip: **34639** 25. Country: **USA**  
 26. Suite Apt. #, etc.  
 27. City & State: **Riverview, FL.**  
 28. Zip: **33568** 29. Country: **USA**

4. FEI Number  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 owes or has paid the current year Intangible Personal Property Tax due June 30.  Yes  No

9. Name and Address of Current Registered Agent  
**Ghassan Abuimaish**  
**12225 Shady Forest DR.**  
**Riverview - FL 33569**

10. Name and Address of New Registered Agent  
 81 Name: **Ghassan Abuimaish**  
 82 Street Address (P.O. Box Number if Not Acceptable): **4109 Land O'Lakes Blvd.**  
 83  
 84 City: **Land O'Lakes** FL 85 Zip Code: **34639**

11. Pursuant to the provisions of Sections 607.0532 and 607.1538, 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 \_\_\_\_\_ DATE \_\_\_\_\_

12. OFFICERS AND DIRECTORS

TITLE	<b>Ghassan Abuimaish - Pres.</b>	<input type="checkbox"/> DELETE
NAME	<b>12225 Shady Forest DR.</b>	
STREET ADDRESS	<b>Riverview, FL 33569</b>	
CITY-ST-ZIP		
TITLE	<b>Vice President</b>	<input type="checkbox"/> DELETE
NAME	<b>Amjed Abuemaish</b>	
STREET ADDRESS	<b>10218 Evening Trail DR.</b>	
CITY-ST-ZIP	<b>Riverview, FL 33569</b>	
TITLE	<b>Secretary</b>	<input type="checkbox"/> DELETE
NAME	<b>Faten Abuimaish</b>	
STREET ADDRESS	<b>12225 Shady Forest DR.</b>	
CITY-ST-ZIP	<b>Riverview, FL 33569</b>	
TITLE		<input type="checkbox"/> DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

11 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
12 NAME	
13 STREET ADDRESS	
14 CITY-ST-ZIP	
21 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
22 NAME	
23 STREET ADDRESS	
24 CITY-ST-ZIP	
31 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
32 NAME	
33 STREET ADDRESS	
34 CITY-ST-ZIP	
41 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
42 NAME	
43 STREET ADDRESS	
44 CITY-ST-ZIP	
51 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
52 NAME	
53 STREET ADDRESS	
54 CITY-ST-ZIP	
61 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
62 NAME	
63 STREET ADDRESS	
64 CITY-ST-ZIP	

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**PE**  
**8.7**

14. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(c), Florida Statutes. I further certify that the information indicated on this annual report or supplement thereto 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 to be reported on, that I am authorized to execute this report as required by Chapter 607, Florida Statutes, and that my name appears in Block 12 or Block 13 if I changed or am familiar with an address.

SIGNATURE: **Ghassan Abuimaish** DATE: **7-24-98** TIME: **8:13-336-2194**

CR2E034 (10/97)

**PRUDENTIAL BUSINESS GROUP, INC.**

(2)

July 24th, 1998

Florida Department of State  
Division of Corporation  
P.O. Box 6327  
Tallahassee, Florida 32314

Dear Sir,

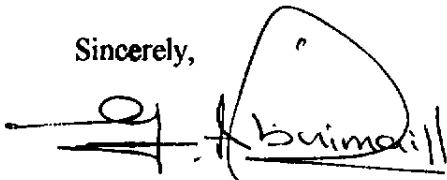
This to inform you pursuant to your letter that we have not received any renewal notices for the above corporation.

Enclosed, please find renewal form supplied and renewal fee.

Your cooperation and understanding is greatly appreciated.

Thank You,

Sincerely,

A handwritten signature in black ink, appearing to read "Ghassan Abuimaish". The signature is written over a horizontal line and includes a large, stylized flourish above the name.

Ghassan Abuimaish

4109 Land O' Lakes Blvd.  
Land O' Lakes, FL 34639

Phone: 813-336-2194  
Fax : 813-671-7123