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PROFIT CORPORATION ANNUAL REPORT 1999



FLORIDA DEPARTMENT OF STATE Katherine Harris Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P98000033802

1. Corporation Name SHAHI & CO.

Principal Place of Business 8055 N.W. 77TH COURT, STE 3 MIAMI FL 33166

Mailing Address 8055 N.W. 77TH COURT, STE 3 MIAMI FL 33166

2. Principal Place of Business

2a. Mailing Address

21 Suite, Apt #, etc

26 Suite, Apt #, etc

22 City & State

27 City & State

23 Zip Country

28 Zip Country

9. Name and Address of Current Registered Agent

MONTELLO, LOUIS R 777 BRICKELL AVE., STE. 1070 MIAMI FL 33131

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 607.0502 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 filing change)

DATE

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

11 TITLE [] DELETE INCORPORATOR NAME Louis R. Montello STREET ADDRESS 777 Brickell Ave, Ste 1070 CITY-ST-ZIP Miami, FL 33131

12 NAME 13 STREET ADDRESS 14 CITY-ST-ZIP

[] Change [] Addition

15 TITLE [] DELETE NAME STREET ADDRESS CITY-ST-ZIP

17 TITLE 18 NAME 19 STREET ADDRESS 20 CITY-ST-ZIP

[] Change [] Addition

21 TITLE [] DELETE NAME STREET ADDRESS CITY-ST-ZIP

23 TITLE 24 NAME 25 STREET ADDRESS 26 CITY-ST-ZIP

[] Change [] Addition

27 TITLE [] DELETE NAME STREET ADDRESS CITY-ST-ZIP

29 TITLE 30 NAME 31 STREET ADDRESS 32 CITY-ST-ZIP

[] Change [] Addition

33 TITLE [] DELETE NAME STREET ADDRESS CITY-ST-ZIP

35 TITLE 36 NAME 37 STREET ADDRESS 38 CITY-ST-ZIP

[] Change [] Addition

39 TITLE [] DELETE NAME STREET ADDRESS CITY-ST-ZIP

41 TITLE 42 NAME 43 STREET ADDRESS 44 CITY-ST-ZIP

[] Change [] Addition

14. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(b), 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 to this address, with all other like empowered

SIGNATURE: [Signature] Incorporator

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

2/23/99 (305) 373-0300

FILED

99 MAR -2 PM 2:00

SECRETARY OF STATE TALLAHASSEE, FLORIDA



DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

04/13/1998

4. FEI Number

[X] 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 the current year intangible Personal Property Tax [] Yes [] No

10. Name and Address of New Registered Agent

600002798926-2 -03/09/99-01031-016 ****150.00 ****150.00

TS. 3/4/99 99PR

CR2E034 (11/98)