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PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State

DIVISION OF CORPORATIONS

1996

| ATAA, | INC. | | | | | |
|--|--|--|--|---|--------------------------------------|--|
| Principal Place | of Business | Mailing Address | | I I BERNOLD OF LEIKER ODDER BUILD FILM | B Bill Bibli Bibli Bibli | |
| 5205 E FOWI TAMPA FL 33 US | | 5205 E FOWLER AVE TAMPA FL 33617 US | | | | |
| 03 | | 03 | | 3. Date Incorporated or Qualified | 3a. Date of La | |
| 2 Princinal Pl | ace of Business | 2a. Mailing Address | | 05/06/1991 4. FET Number | 02/02/ | |
| 1 | 000 0. 20011000 | 26 | | 59-3063751 | } | Applied For Not Applicable |
| Suite, Apt. | #, etc. | Suite, Apl. #, etc. | | · · · · · · · · · · · · · · · · · · · | \$8 | .75 Additional |
| 2 | | 27 | | 5. Certificate of Status Desired | 1 1 | ee Required |
| Crty & State | 9 | City & State | | 6. Election Campaign Financing | \$: | 5.00 May Be |
| 3 | | 28 | | Trust Fund Contribution | | dded to Fees |
| Zip al | Country 25 | Zip 29 | Country 30 | 8. This corporation has liability for Florida Statutes Yes | • | ers 199.032, |
| 4 | g. Name and Address of Currer | <u>I - I</u> | | 10. Name and Address of New I | | |
| | | | 81 Name / | KHTAR KADIR | | |
| KADIR, A | AKHTAR | | 82 Street Add | trans (P.O. Box Number is Not Accorded | Rai A | |
| | /EST BUFFALO AVENUE | | Sireet Aud | ress (P.O. Box Number is Not Acceptal | HYE | |
| | FL 33603 | | 83 | | | |
| | | | 84 City | L 20 C 4 | 85 | Zip Code |
| | | | | TOP/A pration submits this statement for the pu | FL | 3.3617 |
| familiar wit | th, and accept the obligations of. Sect | ion 607.0505, Florida Statutes | | ard of directors. Thereby accept the app | ointment as registi | ered agent. I am |
| SIGNATURE _ | Signature, typely or printed name of register aragent | AKHTAR (AKHTAR) | KAO(R.) Off. Registered Agent signalus, respire | ed when rehabilings | DATE | |
| SIGNATURE _ | Sgnature, typel or printed name of registered agent OFFICERS AN | A AKHTAR and tile is applicable. (IXC D DIRECTORS | KAO(R) DIL Region et Agent signaviru ne piru 13. | | DATE ICERS AND DIRE | CTORS IN 12 |
| Signature ₋ 12. | Sgnature, types of primed name of register agent OFFICERS AND | AKHTAR (AKHTAR) | KAO(R.) Off. Registered Agent signalus, respire | ed when rehabilings | DATE | CTORS IN 12 |
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SIGNATURE:

AKHTAR KADIR) 01-16-46 (813) 985-7732