

**FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00**

**CORPORATION  
ANNUAL REPORT  
1995**



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

APPROVED  
AND  
FILED

**DOCUMENT # 242417 (4)**

95 MAY -1 PM 7:29

1. Corporation Name  
**SIRGANY INTERNATIONAL, INC.**

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

DO NOT WRITE IN THIS SPACE.

Principal Place of Business  
**MIAMI INTERNATIONAL AIRPORT  
P O BOX 59-2313  
MIAMI FL 33159**

Mailing Address  
**MIAMI INTERNATIONAL AIRPORT  
P O BOX 59-2313  
MIAMI FL 33159**

3. Date Incorporated or Qualified  
**11/30/1960**

3a. Date of Last Report  
**03/15/1994**

2. Principal Place of Business

2a. Mailing Address

4. FEI Number  
**59-0911481**

Applied For  
 Not Applicable

21 Suite, Apt. #, etc.

26 Suite, Apt. #, etc.

5. Certificate of Status Desired  **\$8.75 Additional Fee Required**

22 City & State

27 City & State

6. Election Campaign Financing Trust Fund Contribution  **\$5.00 May Be Added to Fees**

24 Zip Country

29 Zip Country

8. This corporation has liability for marginal tax under S. 199.032, Florida Statutes  Yes  No

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

**KAYAL, RAYMOND J.  
6850 S.W.99TH.TERRACE  
MIAMI FL 33156**

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 new/strng)

DATE

12. OFFICERS AND DIRECTORS	
TITLE	<b>PD</b>
NAME	<b>KAYAL, RAYMOND J.</b>
STREET ADDRESS	<b>6850 S.W.99TH.TERRACE</b>
CITY - ST - ZIP	<b>MIAMI, FLORIDA 00000</b>
TITLE	<b>D</b>
NAME	<b>SIRGANY, MITCHELL</b>
STREET ADDRESS	<b>5500 COLLINS AVENUE</b>
CITY - ST - ZIP	<b>MIAMI BEACH FL</b>
TITLE	<b>STD</b>
NAME	<b>KAYAL, LORAIN S.</b>
STREET ADDRESS	<b>6850 S.W.99TH.TERRACE</b>
CITY - ST - ZIP	<b>MIAMI BEACH FL</b>
TITLE	
NAME	
STREET ADDRESS	
CITY - ST - ZIP	
TITLE	
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	

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 110.07(3)(k), 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 of this form, 1107 (changed) or on an attachment with an address.

SIGNATURE: *Raymond J. Kayal, President*  
SIRGANY INTERNATIONAL, INC.  
SIGNATURE AND TYPED OR PRINTED NAME OF REGISTERING OFFICER OR DIRECTOR

4/27/95 (205) 591-5754  
DATE