SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER AUGUST 0, 1995.
AMOUNT DUE ON OR BEFORE 8/0/95: $225 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: $370)

PROFIT CORPORATION ANNUAL REPORT
1995

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

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
95 JUN 26 AM 8:17

DOCUMENT # **631113** **(8)**

1. Corporation Name
AL-NAYEM INTER'L INCORPORATED

Principal Place of Business	Mailing Address
229 GULFVIEW BLVD. CLEARWATER BEACH FL 34630	229 GULFVIEW BLVD. CLEARWATER BEACH FL 34630

DO NOT WRITE IN THIS SPACE.

3. Date Incorporated or Qualified: 07/27/1979
3a. Date of Last Report: 05/01/1994

2. Principal Place of Business
21 229 GULFVIEW BLVD
Suite, Apt. #, etc. 22
City & State 23 CLEARWATER, FL
Zip 24 34630 Country 25

2a. Mailing Address
26
Suite, Apt. #, etc. 27
City & State 28
Zip 29 Country 30

4. FEI Number: 59-1939999 ☑ 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 has liability for intangible tax under s. 199.032, Florida Statutes ☑ Yes ☐ No

9. Name and Address of Current Registered Agent

CHOE, DONG HOON
229 GULFVIEW BLVD.
CLEARWATER BEACH FL 34630

10. Name and Address of New Registered Agent

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 _____ DATE
Signature, typed or printed name of registered agent and the # applicable (NOTE: Registered Agent signature required when reinstating)

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12		
TITLE	PD	11 TITLE		☐ Change ☐ Addition
NAME	CHOE, DONG HOON	12 NAME		
STREET ADDRESS	229 GULFVIEW BLVD.	13 STREET ADDRESS		
CITY-ST-ZIP	CLEARWATER BCH FL	14 CITY-ST-ZIP		
TITLE	ST	21 TITLE		☐ Change ☐ Addition
NAME	CHOE, YOUNG AE	22 NAME		
STREET ADDRESS	229 GULFVIEW BLVD.	23 STREET ADDRESS		
CITY-ST-ZIP	CLEARWATER BCH FL	24 CITY-ST-ZIP		
TITLE	D	31 TITLE		☑ Change ☐ Addition
NAME	ALDASHTI, ABBAS JOWHAR S	32 NAME	RESIGNED	
STREET ADDRESS	229 GULFVIEW BLVD.	33 STREET ADDRESS		
CITY-ST-ZIP	CLEARWATER BCH FL	34 CITY-ST-ZIP		
TITLE	D	41 TITLE		☑ Change ☐ Addition
NAME	ALKABBAZ, KHADIJAH A.R.	42 NAME	RESIGNED	
STREET ADDRESS	229 GULFVIEW BLVD.	43 STREET ADDRESS		
CITY-ST-ZIP	CLEARWATER BCH FL	44 CITY-ST-ZIP		
TITLE	VD	51 TITLE		☐ Change ☐ Addition
NAME	CHOE, HUI WOONG	52 NAME		
STREET ADDRESS	229 GULFVIEW BLVD.	53 STREET ADDRESS		
CITY-ST-ZIP	CLEARWATER BCH FL	54 CITY-ST-ZIP		
TITLE		61 TITLE		☐ Change ☐ Addition
NAME		62 NAME		
STREET ADDRESS		63 STREET ADDRESS		
CITY-ST-ZIP		64 CITY-ST-ZIP		

CR2E034 (3/95)

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 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: H.W. CHOE/V.P. JUNE 20, 95 (813) 446-6697
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #

01T4507 CP