| FUNCHORATION ANNUAL REPORT Senter 1998  DOCUMENT # 641591 LUMINARE CONTRACT, INC.  Principal Pace of Business TAX Senter 1998  DO NOT Written Int Int SEACE  1. Corposition Name LUMINARE CONTRACT, INC.  Principal Pace of Business TAX SW 4611 STREET MAN FL SSISS  Assule Composition of Qualified 10/10/1979  2. Finicipal Pace of Business TAX SW 4611 STREET MAN FL SSISS  DO NOT Written Int Int SEACE  2. Subset Tocoposition of Qualified 10/10/1979  2. Finicipal Pace of Business TAX SW 4611 STREET MAN FL SSISS  DO NOT Written Int Int SEACE  2. Subset Tocoposition of Qualified 10/10/1979  2. Finicipal Pace of Business TAX SW 4611 STREET MAN FL SSISS  DO NOT Written Int Int SEACE  2. Subset Tocoposition of Qualified 10/10/1979  2. Finicipal Pace of Business TAX SW 4611 STREET MAN FL SSISS  DO NOT Written Int Int SEACE  3. Date Incorposition of Qualified 10/10/1979  4. FER Number SW 22222692  3. Date Incorposition of State Int Int SEACE  3. Date Incorposition of State Int Int Int SEACE  3. Date Incorposition of State Int Int Int Int SEACE  4. FER Number SW 2222692  3. Date Incorposition of State Int   | FIL                               | E NOW: FILING FEE A  | FILED   |   |  |  |
|--|-----------------------------------|--|---|---|--|--|
| LUMINAIRE CONTRACT, INC.  Principal Place of Business 120 SW 45TH STREET MAIR FL 51155  Well FL 51155  DO NOT WHITE IN THIS SPACE  3. Date Incorporated or Orabilities 10/10/1979  2. Principal Place of Business 21   |                                   | RPORATION<br>IUAL REPORT   | Sandra E<br>Secreta   | 3. Morth m<br>ry of Stat  | Jan 28 1998  | 8:00am   |
| Principal Place of Business Mailing Address 7200 SW 45TH STREET MAMI FL 3315S  DO NOT WRITE IN THIS SPACE  3. Data Incorporated or Qualified 10/10/1973  2. Principal Place of Business 2. A Mailing Address 2. A Mailing Address 3. Data Incorporated or Qualified 10/10/1973  2. Principal Place of Business 2. A Mailing Address 3. Data Incorporated or Qualified 10/10/1973  Salta, Apt J. etc. 3. Data Incorporated or Qualified 10/10/1973  Salta, Apt J. etc. 3. Data Incorporated or Qualified 10/10/1973  Salta, Apt J. etc. 3. Data Incorporated or Qualified 10/10/1973  Salta, Apt J. etc. 3. Data Incorporated or Qualified 10/10/1973  Salta, Apt J. etc. 3. Data Incorporated or Qualified 10/10/1973  Salta, Apt J. etc. 3. Data Incorporated or Qualified 10/10/1973  Salta, Apt J. etc. 3. Data Incorporated or Qualified 10/10/1973  Salta, Apt J. etc. 3. Data Incorporated or Qualified 10/10/1973  Salta, Apt J. etc. 3. Data Incorporated or Qualified 10/10/1973  Salta, Apt J. etc. 3. Data Incorporated or Qualified 10/10/1973  Salta, Apt J. etc. 3. Data Incorporated or Qualified 10/10/1973  Salta, Apt J. etc. 3. Data Incorporated or Qualified 10/10/1973  Salta, Apt J. etc. 3. Data Incorporated or Qualified 10/10/1973  Salta, Apt J. etc. 3. Data Incorporated or Qualified 3. Salta, Apt J. etc. 3. Data Incorporated or Qualified 3. Salta, Apt J. etc. 3. Data Incorporated or Qualified 3. Salta, Apt J. etc. 3. Data Incorporated or Qualified 3. Salta, Apt J. etc. 3. Data Incorporated or Qualified 3. Salta, Apt J. etc. 3. Data Incorporated or Qualified 3. Salta, Apt J. etc. 3. Data Incorporated or Qualified 3. Salta, Apt J. etc. 3. Data Incorporated or Qualified 3. Salta, Apt J. etc. 3. Data Incorporated or Qualified 3. Salta, Apt J. etc. 3. Data Incorporated or Qualified 3. Salta, Apt J. etc. 3. Data Incorporated or Qualified 3. Salta, Apt J. etc. 3. Data Incorporated or Qualified 3. Salta, Apt J. etc. 3. Data Incorporated or Qualified 3. Salta, Apt J. etc. 3. Data Incorporated or Qualified 3. Salta, Apt J. etc. 3. Data Incorporated or Qual |                                   |  | 1 (3)   |   |  | or state   |
| Applied For MAMI FL 33155  A Principal Pace of Business  2 A Mailing Address  2 A Mailing Address  2 A Mailing Address  3 Date Incorporated or Qualified 10/10/1979  4 Per Name  3 Date Incorporated or Qualified 10/10/1979  4 Per Name  5 Suite, Apt. 8, etc.  2 Cly & State  3 Name and Address of Current Registered Agent  KASSAMALI, NASIR  7300 SW 45 ST.  MIAMI FL 33155  3 Name and Address of Obs., in the State of Forids. State. Park years and Address of New Registered Agent  11. Pursuant to the provisions of Sections 607,1508, Florids State. Below comparation submits this statement for the purpose of Changing its registered agent. In the Provisions of Section 207, |                                   |  |   |   |  |  |
| DO NOT WHITE IN THIS SPACE   | 7300 SW 45                        | TH STREET  | 7300 SW 45TH STREET   |   |  | 1811 SIBIL BEBER BIBIL BEBER 1882                      |
| 2. Principal Pisce of Business   2a. Mailing Address   4. FEI Number   5.90-222692   Not Applied For Special Status Desired   5. Certificate of Status Desired   5. Election Campaign Financing   5.00 May Be Added to Fees   5. Certificate of Status Desired   5. Election Campaign Financing   5.00 May Be Added to Fees   5. The component was on the special tree outrent year intelligible Personal Property Tax due June 30.   1 mg    |                                   |  |   |   | 3. Date Incorporated or Qualified  | S SPACE  |
| Suite, Apt. If., etc.    Suite, Apt. If., etc.   Suite, Apt. etc.   Suite, Apt. If., etc.   Suite, Apt. If., etc.   Suite, Apt. etc.   Suite, Apt. If., etc.   Suite, Apt. etc.   Suite, Ap | <b>⊢</b> .                        | Place of Business  | <b>⊢</b> •  | :   | 4. FEI Number  | <del>   </del>   |
| 28   | 22                                |  | <u> </u>  | :   |  | \$8.75 Additional                                      |
| 28   | 23                                |  | 28  | 0.  | Trust Fund Contribution  | Added to Fees  |
| KASSAMALI, NASIR 7300 SW 45 ST. MIAMI FL 33155  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-name 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 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 submits this statement for the purpose of changing its registered spent, I am familiar with, and accept the obligations of, Section 607,0505, Florida Statutes.  SIGNATURE  12. OFFICERS AND DIRECTORS   11. ITILE   DATE   1. ITILE   DATE   DATE   1. ITILE   DATE   DATE   1. ITILE   DATE   DATE   1. ITILE   DATE   DATE | 24                                | 25   | 29  |   | Personal Property Tax due June 30.   | ☐ Yes ☐ No   |
| MIAMI FL 33155    Ba   |                                   | ASSAMALI, NASIR  |   | 81 Name   | to. Name and Address of New Hegistere  | u Agent  |
| B4   | I GET JUECU MUUT                  |  |   |   | ress (P.O. Box Number is Not Acceptable)   | ·  |
| The pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named 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 etie if applicable.   NOTE   Registered Agent signature recidred when reinstating)   DATE  |                                   |  |   | 83  |  | \$ <u> </u>  |
| 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 agent, a 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, a manufacture of the purpose of changing its registered agent, a manufacture of the purpose of changing its registered agent and its if applicative.  SIGNATURE  PD   |                                   |  |   | 84 City   | <b>F</b>   | 85 Zip Code  |
| Signature- hyped or printed name of registered agent and tills if applicable.   (NOTE: Registered Agent signature recorded when renestating)   DATE  | 11. Pursuant office or agent. I a | to the provisions of Sections 607.0502<br>registered agent, or both, in the State a<br>rm familiar with, and accept the obliga | 2 and 607.1508, Florida Statute<br>of Florida. Such change was a<br>tions of, Section 607.0505, Flo | es, the above-named corp<br>uthorized by the corporal<br>rida Statutes. | poration submits this statement for the purpose tion's board of directors. I hereby accept the appropriate the purpose the appropriate the purpose the | of changing its registered<br>opointment as registered |
| 13.   ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12  | SIGNATURE                         | Signature, typed or printed name of registered agen  | t and title if applicable. (NOTE  | : Registered Agent signature regula                                     | red when reinstallon) DATE   |  |
| NAME   KASSAMALI, NASIR   12 NAME   1.3 STREET ADDRESS   CITY-ST-ZIP   MIAMI FL   1.4 CITY-ST-ZIP   TITLE   STD   DELETE   21 TITLE   Change   Addition    | 12.                               | OFFICERS AND   | DIRECTORS   |   |  | ND DIRECTORS IN 12                                     |
| STREET ADDRESS   T300 SW 45 STREET   1.3 STREET ADDRESS   1.4 CITY-ST-ZIP  |                                   | 1  | ☐ DELETE  |   |  | Change Addition  |
| City - St - Zip  | · · · · · ·                       | ,  |   | 1   |  |  |
| TITLE         STD         DELETE         21 TITLE         Addition           NAME         KASSAMALI, NARGIS         22 NAME         22 NAME           STREET ADDRESS         7300 SW 45 STREET         2.4 CITY-ST-ZIP         Change         Addition           TITLE         DELETE         3.1 TITLE         Change         Addition           NAME         3.2 NAME         3.3 STREET ADDRESS         CITY-ST-ZIP         Change         Addition           STREET ADDRESS         4.1 TITLE         Change         Addition           NAME         4.2 NAME         4.2 NAME         4.3 STREET ADDRESS           CITY-ST-ZIP         4.4 CITY-ST-ZIP         Change         Addition           TITLE         DELETE         5.1 TITLE         Change         Addition           NAME         4.2 NAME         4.3 STREET ADDRESS         CITY-ST-ZIP         Change         Addition           TITLE         DELETE         5.1 TITLE         Change         Addition           NAME         5.2 NAME         5.3 STREET ADDRESS         CITY-ST-ZIP         Change         Addition           STREET ADDRESS         5.3 STREET ADDRESS         5.4 CITY-ST-ZIP         Change         Addition  |                                   | · · · · · · · · · · · · · · ·  |   |   |  |  |
| STREET ADDRESS   7300 SW 45 STREET   2.3 STREET ADDRESS   2.4 CITY-ST-ZIP   MIAMI FL   DELETE   3.1 ITILE   Change   Addition  |                                   |  | ☐ DELETE  |   |  | ☐ Change ☐ Addition                                    |
| CITY-ST-ZIP         MIAMI FL         2.4 GITY-ST-ZIP           TITLE         DELETE         3.1 TITLE         Change         Addition           NAME         3.2 NAME         3.3 STREET ADDRESS         CITY-ST-ZIP         Change         Addition           TITLE         DELETE         4.1 TITLE         Change         Addition           NAME         4.2 NAME         4.2 NAME         CITY-ST-ZIP         Change         Addition           STREET ADDRESS         4.4 CITY-ST-ZIP         Change         Addition           NAME         5.1 TITLE         Change         Addition           NAME         5.2 NAME         Change         Addition           STREET ADDRESS         5.3 STREET ADDRESS         CITY-ST-ZIP         Change         Addition           STREET ADDRESS         5.3 STREET ADDRESS         CITY-ST-ZIP         Change         Addition   |                                   |  |   | 2.2 NAME  |  |  |
| TITLE         DELETE         3.1 TITLE         Change         Addition           NAME         32 NAME         STREET ADDRESS         STREET ADDRESS         CITY-ST-ZIP         TITLE         Change         Addition           NAME         1 TITLE         Change         Addition         Addition           NAME         4.2 NAME         CTY-ST-ZIP         CTY-ST-ZIP         TITLE         CTY-ST-ZIP         CTY-ST-   | 1                                 |  |   |   |  |  |
| NAME       3.2 NAME         STREET ADDRESS       3.3 STREET ADDRESS         CITY-ST-ZIP       3.4 CITY-ST-ZIP         TITLE       DELETE       4.1 TITLE       Change       Addition         NAME       4.2 NAME         STREET ADDRESS       4.3 STREET ADDRESS         CITY-ST-ZIP       4.4 CITY-ST-ZIP       Change       Addition         NAME       5.1 TITLE       Change       Addition         NAME       5.2 NAME       STREET ADDRESS       5.3 STREET ADDRESS         CITY-ST-ZIP       5.4 CITY-ST-ZIP       5.4 CITY-ST-ZIP       5.4 CITY-ST-ZIP  |                                   | MINIMIL  | ☐ DELETE  |   |  | Change Addition  |
| CITY-ST-ZIP         3.4. CITY-ST-ZIP           TITLE         DELETE         4.1 TITLE         Change         Addition           NAME         4.2 NAME         STREET ADDRESS         CITY-ST-ZIP         CTY-ST-ZIP         TITLE         CTY-ST-ZIP         CTY-ST-ZIP         CTY-ST-ZIP         CTY-ST-ZIP         Addition         NAME         STREET ADDRESS         STREET   | NAME                              |  | _   |   |  | Critarigo / Redition                                   |
| TITLE         DELETE         4.1 TITLE         Change         Addition           NAME         4.2 NAME         4.3 STREET ADDRESS         CITY-ST-ZIP         4.4 CITY-ST-ZIP         Change         Addition           NAME         DELETE         5.1 TITLE         Change         Addition           NAME         5.2 NAME         STREET ADDRESS         5.3 STREET ADDRESS           CITY-ST-ZIP         5.4 CITY-ST-ZIP         5.4 CITY-ST-ZIP  | STREET ADDRESS                    |  |   | 3.3 STREET ADDRESS  |  |  |
| NAME         4.2 NAME           STREET ADDRESS         4.3 STREET ADDRESS           CITY-ST-ZIP         4.4 CITY-ST-ZIP           TITLE         DELETE         5.1 TITLE         Change         Addition           NAME         5.2 NAME           STREET ADDRESS         5.3 STREET ADDRESS         CITY-ST-ZIP         5.4 CITY-ST-ZIP   |                                   |  | · · · · · · · · · · · · · · · · · · ·   |   |  |  |
| STREET ADDRESS         4.3 STREET ADDRESS           CITY-ST-ZIP         4.4 CITY-ST-ZIP           TITLE         DELETE         5.1 TITLE         Change         Addition           NAME         5.2 NAME           STREET ADDRESS         5.3 STREET ADDRESS         CITY-ST-ZIP         5.4 CITY-ST-ZIP   |                                   |  | L_I DELETE  |   |  | ☐ Change ☐ Addition                                    |
| CITY-ST-ZIP         4.4 CITY-ST-ZIP           TITLE         DELETE         5.1 TITLE         Change         Addition           NAME         5.2 NAME           STREET ADDRESS         5.3 STREET ADDRESS         CITY-ST-ZIP         5.4 CITY-ST-ZIP   |                                   |  |   |   |  |  |
| TITLE DELETE 5.1 TITLE Change Addition  NAME 5.2 NAME  STREET ADDRESS CITY-ST-ZIP 5.4 CITY-ST-ZIP  |                                   |  |   |   |  |  |
| STREET ADDRESS  CITY-ST-ZIP  5.3 STREET ADDRESS  5.4 CITY-ST-ZIP   |                                   |  | DELETE  |   |  | ☐ Change ☐ Addition                                    |
| CITY-ST-ZIP 5.4 CITY-ST-ZIP  | NAME                              |  |   | 5.2 NAME  |  | ł  |
|  |                                   |  |   |   |  |  |
|  | CITY-ST-ZIP<br>TITLE              |  | ☐ DELETE  | 5.4 CITY-ST-ZIP<br>6.1 TITLE  |  | Change Addition  |

6.1 TITLE

6.2 NAME

14. I hereby certify that the information supplied with this filing 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.

WAND TURE PRODUCTION

6.3 STREET ADDRESS

Change

01/15/98

Addition

NAME

STREET ADDRESS

SIGNATURE: