


2004 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Jan 28, 2004 08:00 AM
Secretary of State

DOCUMENT # F17231 1. Entity Name INTERNATIONAL RESOURCES & INVESTMENT CORPORATION	
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Principal Place of Business 360 HARBOR DRIVE KEY BISCAYNE, FL 33149	Mailing Address 360 HARBOR DRIVE KEY BISCAYNE, FL 33149
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DO NOT WRITE IN THIS SPACE



01242004 No Chg-P CR2E034 (10/03)

4. FEI Number 59-2554994	Applied For <input type="checkbox"/> Not Applicable
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5. Certificate of Status Desired <input checked="" type="checkbox"/>	\$8.75 Additional Fee Required
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8. Name and Address of Current Registered Agent HASSAN, MOSTAFA F 360 HARBOR DRIVE KEY BISCAYNE, FL 33149	DO NOT WRITE IN THIS SPACE
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8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent.

SIGNATURE _____ <small>Signature, typed or printed name of registered agent and file if applicable (NOTE: Registered Agent signature required when reissuing)</small>	DATE _____
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FILE NOW!!! FEE IS \$150.00 After May 1, 2004 Fee will be \$550.00	9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees
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10. OFFICERS AND DIRECTORS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VD HASSAN, NORAH 360 HARBOR DRIVE KEY BISCAYNE, FL
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD HASSAN, MOSTAFA F. 360 HARBOR DRIVE KEY BISCAYNE, FL
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VSD HASSAN, JOSEPH A. 360 HARBOR DRIVE KEY BISCAYNE, FL
TITLE NAME STREET ADDRESS CITY-ST-ZIP	TD HASSAN, SANEYA I. 360 HARBOR DRIVE KEY BISCAYNE, FL
TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	

DO NOT WRITE IN THIS SPACE

000000018961
01/29/04-80003-023 158.75

12. 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 report or supplemental 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: <u>M. F. Hassan</u> <small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR</small>	1-24-04 (305) 371-3001 <small>Date Daytime Phone #</small>
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