	DI EACE DEAD	ALL INICTELIATI	ONS BEEODE (	OMDI ETI	NG THIS FO	>₽M	
•	PLICATION FOR 91-98 STATEMENT	FLORIDA DEPAR Sandra & Secreta	CINS BEFORE C RTMENT OF STATE 3. Mortham ry of State CORPORATIONS		ING THIS FORM.  APPROVED  AND  FILED		
DOCL	JMENT # F61129			98	B MAR -4 A	H 9: 49	
1. Corporation Name					SECRETARY OF STATE TALLAHASSEE, FLORIDA		
	Development Projec	ts, Inc.	8-4431)	"	icinal inodes,	LEONIUM	
200 Ex Suite	ce of Business ecutive Way 216 Vedra Bch., FL 32082	Mailing Address  200 Executive Way Suite 216 Ponte Vedra Bch., FL 32082					
If above addresses are incorrect in any way, line through incorrect information and enter correction below.  2. New Principal Office Address, If Applicable  3. New Mailing Office Address, If Applicable				5	ested on Overliffed		
Suite, Apt. #	cipal Office Address, If Applicable	Suite, Apt. #, etc.	icioss, ii Applicable	Date Incorpor     To Do Busine	rated or Qualified ess in Fforida	01/06/1982	
City & State	, 000	City & State		5. FEI Number 59-2151	993	Applied For Not Applicable	
Zip Country		Zıp	Country	6.	OF STATUS DESIRED	— \$8.75 Additional Fee required	
7. Names a	nd Street Addresses of Each Officer and	or Director (Florida nonprof	it corporations must list at lea	ast 3 directors)			
Title(s)	Name of Officers and/or Directors 2	3 (Do	Street Address of Each Officer and/or Director NOT Use Post Office Box N		4	City / State / Zip	
D/P/S	Shafi, Wasim Olympia		mpia Hotel a Akshie Street		Abdoun Amman, Jo	rdan	
			REINS	TATEN	TENT_	11-98 A. atow 3/4/98	
	Name and Address of Current Registered Agent				9. Name and Address of New Registered Agent		
Suite  City  O. I, being appointed the resistered agent of the above named corporation, am familiar with an lassing appointed the resistered agent of the above named corporation, am familiar with an lassing appointed the resistered agent of the above named corporation, am familiar with an lassing appointed the resistered agent of the above named corporation, am familiar with an lassing appointed the resistered agent of the above named corporation, am familiar with an lassing appointed the resistered agent of the above named corporation.				Address (P.O. Box Number is Not Accentable)  Apt. #, Etc.			
Registered A 11. This Inta	s corporation owes or hangible Personal Propert	STERE ASENT NUST be paid the currer y tax due June 3	nt year 0. Yes	No X	(See	other side for information on intangible tax.)	
this reinst	nat I am an officer or director or the receivatement application, the reason for disso the corporation have been paid and the ripplication is true and accurate, and my sig	lution has been eliminated, t names of individuals listed or	he corporate name satisfies n this form do not qualify for :	the requirements of an exemption unde	f section 607.0401 o	or 617.0401, F.S., that all fees	

SIGNATURE: Wasim Shaft, D/P/S FEB. 15, 1994
SIGNATURE AND INDEE OF PRINTED MAME OF SIGNING OFFICER OR DIRECTOR Date Date Daytime Phone #