FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

1998 DOCUMENT # F63366

(1)

ALLAD INVESTMENT, INC.

FILED Feb 16 1998 8:00am Secretary of State



Suite, Apt. #, etc 22 City & State City & State 28 Country Country Country Suite, Apt. #, etc. 5. Certificate of Status Desired Fee Requ 6. Election Campaign Financing Financing Financing Financing Financing Financing Added to Financing Financin	opticable tional red y Be ses
MEMPHS TN 38104 DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified O1/15/1982 2. Principal Place of Business 26. Mailing Address 26. Mailing Address 26. Suite, Apt #, etc. 27. Suite, Apt #, etc. 29. City & State 29. City & State 29. Country 29. Name and Address of Current Registered Agent MCCABE, BILL, ESQ. 319 N. MAGNOLIA AVENUE ORLANDO FL 32802 DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified O1/15/1982 4. FEI Number 62-1131578 Suite, Apt #, etc. 5. Certificate of Status Desired Fee Requirements 6. Election Campaign Financing Trust Fund Contribution Added to Address of Address of Address of Address of Address of New Registered Agent 10. Name and Address of New Registered Agent MCCABE, BILL, ESQ. 319 N. MAGNOLIA AVENUE ORLANDO FL 32802	opticable tional red y Be ses
DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified 01/15/1982 2. Principal Place of Business 26. Mailing Address 4. FEI Number 62-1131578 Not A Suite, Apt. #, etc 27 City & State City & State City & State City & State 28 City & State City & State City & State 29 Country Added to Fee Requ 27 Country Added to Fee Requ 28 Name and Address of Current Registered Agent MCCABE, BILL, ESQ. 319 N. MAGNOLIA AVENUE ORLANDO FL 32802 See Mailing Address Application of Qualified 01/15/1982 4. FEI Number 6. Election Campaign Financing Trust Fund Contribution Trust Fund Contribution Added to Fee Requ Personal Property Tax due June 30. Yes Name and Address of New Registered Agent MCCABE, BILL, ESQ. 319 N. MAGNOLIA AVENUE ORLANDO FL 32802	opticable tional red y Be ses
3. Date Incorporated or Qualified 01/15/1982 2. Principal Place of Business 26. Mailing Address 62-1131578 26. Mailing Address 62-1131578 Not A Suite, Apt. #, etc Suite, Apt. #, etc 27 City & State City & State City & State City & Stat	opticable tional red y Be ses
2. Principal Place of Business 2. Mailing Address 2. Suite, Apt. #, etc 2. Suite, Apt. #, etc 2. City & State 2. City & State 2. City & State 2. Country 2. Principal Place of Business 3. Fel Number 4. FEl Number 6. Certificate of Status Desired 6. Election Campaign Financing 7 Trust Fund Contribution Added to Fee Requ 2. Country 2. Country 3. This corporation owes or has paid the current year Intang 2. Personal Property Tax due June 30. Yes 3. Name and Address of Current Registered Agent MCCABE, BILL, ESQ. 319 N. MAGNOLIA AVENUE ORLANDO FL 32802 28. Mailing Address 5. Certificate of Status Desired 5. Certificate of Status Desired 6. Election Campaign Financing 7 Trust Fund Contribution Added to Fee Requ 7 Personal Property Tax due June 30. Yes 1 Name 8. Name and Address of New Registered Agent 81 Name 82 Street Address (P.O. Box Number is Not Acceptable)	opticable tional red y Be ses
25 Suite, Apt. #, etc Suite, Apt. #, etc 26 Suite, Apt. #, etc 27 Suite, Apt. #, etc 27 Suite, Apt. #, etc 28 State City & State 28 Country Zip Country Zip Country Zip Country Zip Sign Sign Sign Sign Sign Sign Sign Sign	opticable tional red y Be ses
Suite, Apt. #, etc Fee Requ Struct Fund Campaign Financing Trust Fund Contribution Added to Fee Requ Struct Fund Contribution Added to Fee Requ Fee Requ Trust Fund Contribution Added to Fee Requ Struct Fund Contribution Added to Fee Requ Trust Fund Contribution Added to Fee R	tional red y Be ses ible
Suite, Apt. #, etc 22 City & State City & State 28 Country 29 Country 29 Country 29 Country 29 Suite, Apt. #, etc. 29 Suite, Apt. #, etc. 27 Country 28 Country 29 Suite, Apt. #, etc. 29 Suite, Apt. #, etc. 29 Suite, Apt. #, etc. 29 Country 20 Country 20 Suite, Apt. #, etc. 20 Country 20 Suite, Apt. #, etc. 21 Suite, Apt. #, etc. #	y Be ees ible
City & State City & Country Co	y Be ees ible
City & State 28 Country 29 Country 29 Country 29 30 Country 30 Respond Property Tax due June 30. Yes Interest Agent MCCABE, BILL, ESQ. 319 N. MAGNOLIA AVENUE ORLANDO FL 32802 City & State City & State City & State City & State 28 Country Country 30 Country 8. This corporation owes or has paid the current year Intangent Personal Property Tax due June 30. Yes Interest Agent 10. Name and Address of New Registered Agent 81 Name 82 Street Address (P.O. Box Number is Not Acceptable)	ees ible
Trust Fund Contribution Added to F Zip Country 7ip Country 24 25 29 30 Personal Property Tax due June 30. Yes 1 Name and Address of New Registered Agent MCCABE, BILL, ESQ. 319 N. MAGNOLIA AVENUE ORLANDO FL 32802 Trust Fund Contribution Added to F Country 8. This corporation owes or has paid the current year Intang Personal Property Tax due June 30. Yes 1 Name 10. Name and Address of New Registered Agent 81 Name 82 Street Address (P.O. Box Number is Not Acceptable)	ees ible
Zip Country Zip Country Registered Agent 9. Name and Address of Current Registered Agent MCCABE, BILL, ESO. 319 N. MAGNOLIA AVENUE ORLANDO FL 32802 8. This corporation owes or has paid the current year Intang Personal Property Tax due June 30.	
24 26 29 30 Personal Property Tax due June 30. Yes Name and Address of Current Registered Agent MCCABE, BILL, ESQ. 319 N. MAGNOLIA AVENUE ORLANDO FL 32802 Personal Property Tax due June 30. Yes Name and Address of New Registered Agent 10. Name and Address of New Registered Agent Street Address (P.O. Box Number is Not Acceptable)	
9. Name and Address of Current Registered Agent MCCABE, BILL, ESQ. 319 N. MAGNOLIA AVENUE ORLANDO FL 32802 10. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable)	
319 N. MAGNOLIA AVENUE ORLANDO FL 32802 82 Street Address (P.O. Box Number is Not Acceptable)	
319 N. MAGNOLIA AVENUE ORLANDO FL 32802 82 Street Address (P.O. Box Number is Not Acceptable)	
ORLANDO FL 32802	
⁶³	
1 I	
84 City 85 Zip Coo	
	1
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 runflice or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. Thereby accept the appointment as required agent. Lam familiar with, and accept the obligations of Section 607.0505, Florida Statutes.	gistered
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 required to the property of the corporation of the corpor	stered
agent I am raminar with, and accept the obligations or, section 607,0505, Florida Stables.	1
SIGNATURE Signature typed or printed name of registered agent and tille if opplicable (NOTE Registered Agent signature required when reinstating) DATE	
	112
	Addition
ALLAD OLIADID	4 / 100111011
4000 MINON AVENUE	
STREET ADDRESS 1220 UNION AVENUE 13 STREET ADDRESS	
CITY-ST-ZIP MEMPHIS TN 1.4 CITY-ST-ZIP	
	Addition
NAME ALLAD, LINDA F	
STREET ADDRESS 1220 UNION AVE 2.3 STREET ADDRESS	
LAIGAIDHIC TAI	1
C(11-31-2)	Addition
NAME 3.2 NAME	į
,	
STREET ADDRESS 33 STREET ADDRESS	İ
CITY-ST-ZIP 3.4. CITY-ST-ZIP	
CITY-ST-ZIP 3.4. CITY-ST-ZIP	Addition
CITY-ST-ZIP 3.4. CITY-ST-ZIP	Addition
CITY-S1-ZIP 3.4. CITY-ST-ZIP TITLE	Addition
CITY-S1-ZIP	Addition
CITY-S1-ZIP	Addition Addition
CITY-S1-ZIP	
CITY-S1-ZIP	
CITY-S1-ZIP	
CITY-S1-ZIP	Addition
CITY-ST-ZIP	
CITY-S1-ZIP	Addition
CITY-S1-ZIP	Addition
CITY-ST-ZIP	Addition

indicated on this annual report or supplemental annual report is free 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.

SHABIR ALLAD

9017 725-0630