

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

FILED
May 13 1998 8:00am
Secretary of State

PROFIT CORPORATION ANNUAL REPORT 1998		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # F95000000129 (5)

1. Corporation Name
ECAD FLORIDA CORPORATION

Principal Place of Business
**7310 CHERRY LAKE RD.
GROVELAND FL 34736**

Mailing Address
**7310 CHERRY LAKE RD.
GROVELAND FL 34736**

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified
01/09/1995

2. Principal Place of Business 21 Suite, Apt. #, etc. 22 City & State 23 Zip 24 Country	2a. Mailing Address 25 Suite, Apt. #, etc. 27 City & State 28 Zip 29 Country	4. FEI Number 36-3640036 Applied For Not Applicable	5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required
		6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/> \$5.00 May Be Added to Fees	8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. <input type="checkbox"/> Yes <input type="checkbox"/> No

9. Name and Address of Current Registered Agent

**ELDIRAWI, AHMED DR
18850 ROYAL PALM DR
GROVELAND FL 34736**

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

Signature, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	P <input type="checkbox"/> DELETE	1.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	ELDIRAWI, AHMED DR	1.2 NAME	
STREET ADDRESS	18850 ROYAL PALM DR	1.3 STREET ADDRESS	
CITY-ST-ZIP	GROVELAND FL	1.4 CITY-ST-ZIP	
TITLE	D <input type="checkbox"/> DELETE	2.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	ABDEL-HAMEED, FATHI DR	2.2 NAME	
STREET ADDRESS	2013 BUTLER BAY DR	2.3 STREET ADDRESS	
CITY-ST-ZIP	ORLANDO FL	2.4 CITY-ST-ZIP	
TITLE	D <input type="checkbox"/> DELETE	3.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	ZAKI, KARIM DR	3.2 NAME	
STREET ADDRESS	50 KORNISH EL NILE	3.3 STREET ADDRESS	
CITY-ST-ZIP	CAIRO EGYPT	3.4 CITY-ST-ZIP	
TITLE	D <input type="checkbox"/> DELETE	4.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	ELDIRAWY, AMANY A MS	4.2 NAME	
STREET ADDRESS	5802 NICHOLSON LANE 801	4.3 STREET ADDRESS	
CITY-ST-ZIP	ROCKVILLE MD	4.4 CITY-ST-ZIP	
TITLE	D <input type="checkbox"/> DELETE	5.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	HASHIM, ELMAHDALY D	5.2 NAME	
STREET ADDRESS	IEC P O BOX 7518 N/A	5.3 STREET ADDRESS	
CITY-ST-ZIP	RIYADH SA	5.4 CITY-ST-ZIP	
TITLE	D <input type="checkbox"/> DELETE	6.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	ERIAN, MOUNIR DR	6.2 NAME	
STREET ADDRESS	PO BOX 7897	6.3 STREET ADDRESS	
CITY-ST-ZIP	RIYADH, SAUDI ARABIA	6.4 CITY-ST-ZIP	

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

SIGNATURE: *Ahmed Eldirawi*

4/24/98

CR2E034 (10/97)