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Apr 26, 1999 8:00 am  
Secretary of State

04-26-1999 90128 043 \*\*\*150.00

PROFIT CORPORATION  
ANNUAL REPORT  
1999



FLORIDA DEPARTMENT OF STATE  
Katherine Harris  
Secretary of State  
DIVISION OF CORPORATIONS

DOCUMENT # F98000000853

1. Corporation Name  
KARAWIA INTERNATIONAL SERVICES, INC.



Principal Place of Business  
3771 242ND STREET  
#205  
TORRANCE CA 90505

Mailing Address  
3771 242ND STREET  
#205  
TORRANCE CA 90505

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business

21  
Suite, Apt. #, etc.

22  
City & State

23  
Zip Country

24  
25

2a. Mailing Address

26  
Suite, Apt. #, etc.

27  
City & State

28  
Zip Country

29  
30

3. Date Incorporated or Qualified

02/12/1998

4. FEI Number

95-4316092

Applied For  
No Applicable

5. Certificate of Status Desired

\$8.75 Additional  
Fee Required

6. Election Campaign Financing  
Trust Fund Contribution

\$5.00 May Be  
Added to Fees

8. This corporation owes the current year Intangible  
Personal Property Tax.  Yes  No

9. Name and Address of Current Registered Agent

C T CORPORATION SYSTEM  
1200 SOUTH PINE ISLAND ROAD  
PLANTATION FL 33324

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

(NOT E: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS  DELETE

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
PSTD  
KARAWIA, OUSAMA  
3771 242ND STREET #205  
TORRANCE CA

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12  Change  Addition

TITLE  DELETE

NAME  
STREET ADDRESS  
CITY-ST-ZIP

1.1 TITLE  Change  Addition

1.2 NAME

1.3 STREET ADDRESS

1.4 CITY-ST-ZIP

TITLE  DELETE

NAME  
STREET ADDRESS  
CITY-ST-ZIP

2.1 TITLE  Change  Addition

2.2 NAME

2.3 STREET ADDRESS

2.4 CITY-ST-ZIP

TITLE  DELETE

NAME  
STREET ADDRESS  
CITY-ST-ZIP

3.1 TITLE  Change  Addition

3.2 NAME

3.3 STREET ADDRESS

3.4 CITY-ST-ZIP

TITLE  DELETE

NAME  
STREET ADDRESS  
CITY-ST-ZIP

4.1 TITLE  Change  Addition

4.2 NAME

4.3 STREET ADDRESS

4.4 CITY-ST-ZIP

TITLE  DELETE

NAME  
STREET ADDRESS  
CITY-ST-ZIP

5.1 TITLE  Change  Addition

5.2 NAME

5.3 STREET ADDRESS

5.4 CITY-ST-ZIP

14. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.073(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, with a letter like empowered.

SIGNATURE:

*[Signature]*  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Ousama Karawia, President 4/15/99

(310) 791-5015

Date

Daytime Phone #

CR2E034 (1/98)