

FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

PROFIT
CORPORATION
ANNUAL REPORT
1996



FLORIDA DEPARTMENT OF STATE
Suzanne B. Martham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # **G65979** (8)

1. Corporation Name
YASEL, INC.



Principal Place of Business

Mailing Address

% EROL SAHINOGLU
141 LYMAN AVE
WINTER PARK FL 32789

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141 LYMAN AVE
WINTER PARK FL 32789

3. Date Incorporated or Qualified 10/24/1983	3a. Date of Last Report 01/17/1995
4. FEI Number 59-2330695	Applied For Not 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 has liability for intangible tax under s. 199.032, Florida Statutes. ☐ Yes ☐ No	

2. Principal Place of Business	2a. Mailing Address
21. State, Apt. #, etc.	26. State, Apt. #, etc.
22. City & State	27. City & State
23. Zip	28. Zip
24. Country	29. Country
25. Country	30. Country

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

SAHINOGLU, EROL
141 LYMAN AVE
WINTER PARK FL 32790

81. Name	
82. Street Address (P.O. Box Number is Not Acceptable)	
83. City	
84. City	
FL	85. Zip Code

11. Pursuant to the provisions of Sections 607.0802 and 607.1506, 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 607.0802, Florida Statutes.

SIGNATURE

Signature of Registered Agent

Signature of Registered Agent

Signature of Registered Agent

12. OFFICERS AND DIRECTORS	
1. TITLE	PD
2. NAME	SAHINOGLU, EROL
3. STREET ADDRESS	141 LYMAN AVE
4. CITY, ST, ZIP	WINTER PARK FL
5. TITLE	STD
6. NAME	SAHINOGLU, AUGUSTINE
7. STREET ADDRESS	141 LYMAN AVE
8. CITY, ST, ZIP	WINTER PARK FL
9. TITLE	
10. NAME	
11. STREET ADDRESS	
12. CITY, ST, ZIP	
13. TITLE	
14. NAME	
15. STREET ADDRESS	
16. CITY, ST, ZIP	
17. TITLE	
18. NAME	
19. STREET ADDRESS	
20. CITY, ST, ZIP	

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
1. TITLE	☐ Change ☐ Addition
2. NAME	
3. STREET ADDRESS	
4. CITY, ST, ZIP	
5. TITLE	☐ Change ☐ Addition
6. NAME	
7. STREET ADDRESS	
8. CITY, ST, ZIP	
9. TITLE	☐ Change ☐ Addition
10. NAME	
11. STREET ADDRESS	
12. CITY, ST, ZIP	
13. TITLE	☐ Change ☐ Addition
14. NAME	
15. STREET ADDRESS	
16. CITY, ST, ZIP	
17. TITLE	☐ Change ☐ Addition
18. NAME	
19. STREET ADDRESS	
20. CITY, ST, ZIP	

14. I do hereby certify that the information supplied with this filing was voluntarily furnished and does not qualify for the exemption stated in Section 139.07(3)(k), Florida Statutes. I further certify that the information was not furnished for a financial report or supplemental annual report and is true and accurate and that my signature shall have the same legal effect as if made under oath. 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 originally listed with additions.

SIGNATURE: *Erol Sahinoglu* 1/17/96 (407) 644-3225
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

CR2E034 (12/95)