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

CORPORATION ANNUAL REPORT

1997

Principal Plane of Business



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # H01992

Mailing Address

MAGIDO ORIENTAL RUGS, INC.

Apr 16 1997 8:00am Secretary of State

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FILED

C/O JOSEF SH 1490 BISCAYNE MIAMI FL 33132	BLVD.	C/O JOSEF SHAKIB 1490 BISCAYNE BLVD. MIAMI FL 33132-1417			3. Date Incorporated or Qualified	3e. Date of Last Report	— ₁
					04/10/1984	04/18/1996	
2. Principal Pa	ace of Busnoss	2a. Mailing Address 26			4. FEI Number 59-2405771	Applied For Not Applica	
Suite, Apr. (#, etc	Suite, Apt. #, etc.		,	5. Certificate of Status Desired	\$8.75 Additiona	
City & State	;	City & State			6. Election Campaign Financing Trust Fund Contribution	\$5.00 May Be Added to Fees	
Ζ(p)	Country 25	Zip	Zip Country			r intangible tax under s. 199.032 Yes No	2.
<u> </u>	9. Name and Address of C		1		10. Name and Address of New	legistered Agent	
SHA	KIB, JOSEF		. 8	1 Name			
1490	BISCAYNE BLVD JI FL 33132		8	2 Street Add	dress (P.O. Box Number is Not Accept	able)	
			8	3			
	•		8	4 City	4	FL 85 Zip Code	
I office or re	edistered agent, or both, in the	7.0502 and 607.1508, Florida Statut State of Florida. Such change was a obligations of, Section 607.0505, Flo	authorized	by the corpora	rporation submits this statement for the ation's board of directors. I hereby acc	purpose of changing its registe ept the appointment as registere	red 3d
SIGNATURE	Signer in I type if or pentical name of registro	AICT	f. Donislated (earl rianghus tod	uired when reinstating)	DATE	
12.		S AND DIRECTORS	13.	Agus physicia radz		ICERS AND DIRECTORS IN 12	
Tiful I	P	DELETE	11 1111	:		☐ Change ☐ Add	dition
NAME	SHAKIB, JOSEF		1 2 NAM	E			
STREET ADDRESS	240 HAMMOND DR.	1.3 \$		ET ADDRESS			
CHY-ST-ZiP	MIAMI SPGS. FL		1.4 CITY-5				
107.05	٧	DELETE	ETE 2.1 TITLE			Change Add	lition
NAME			2.2 NAM	E			
STREET ADDRESS			2.3 STR	ET ADDRESS			
C:1Y - \$1 - 7IP	The state of the s			/-ST-ZIP		Change Add	dition
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VW			3.2 NAM	1			
STREET ADDRESS				EET ADDRESS			
10-1755-74F		DELETE	4.1 TITL	Y-\$1-ZiP E		☐ Change ☐ Add	dition
NAMi		gaptum	4, 2 NAI			•	
SIFEET ALORESS				EE1 ADDRESS			
Offr-St 7₽				-ST-2IP		٠.٨	
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NAM			5.2 NAN	16		41 11.	1/2-
STREEDADORESS			5 3 S 1 R	EET ADDRESS		N 4116	14.
CITY - \$1 - 7df		4 1.4 74 110 114 114 114 114 114 114 114 114 11	546111	-ST-ZIP	1844	11 147	
TRE		DELETE	61 TITL	r [Change 'L_ Add	dition
		DELLIE			~~നന്ന്		
NAME		been	62 NAN		9000021	45855 1019019	
NAME STREET ADORESS		_ been	62 NAN		9000021 -04/17/970 ***165.00	1019019	

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 the fam an officer or director of the corporation or the receiver or frustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Black 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE: