

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

PROFIT
CORPORATION
ANNUAL REPORT
1996



FLORIDA DEPARTMENT OF STATE
Sandra B. Martinson
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # J42255

(6)

1. Corporation Name

SHAHROOZ BANAPOOR, INC.



Principal Place of Business

P.O. BOX 372337
SATELLITE BEACH FL 32937

Mailing Address

P.O. BOX 372337
SATELLITE BEACH FL 32937

2. Principal Place of Business

21

State, Apt. #, etc.

22

City & State

23

Zip

Country

24

9. Name and Address of Current Registered Agent

BANAPOOR, SHAHROOZ
476 A1A SUITE 5
SATELLITE BEACH FL 32937

2a. Mailing Address

26

State, Apt. #, etc.

27

City & State

28

Zip

Country

29

30

3. Date Incorporated or Qualified
11/17/1986

3a. Date of Last Report
04/24/1995

4. FEI Number
59-2767260

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. 193.032,
Florida Statutes ☐ Yes ☐ No

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 of the person filing this report (if not officer or director)

Signature of the Agent for Change of Registered Office or Agent

Date

12. OFFICERS AND DIRECTORS

TITLE

DP
BANAPOOR, SHAHROOZ
3660 TURTLE MOUND RD
MELBOURNE FL

☐ DELETE

NAME

STREET ADDRESS

CITY-STATE-ZIP

TITLE

D
BANAPOOR, SHAHRAM
111 EDEN AVE
SATELLITE BEACH FL

☐ DELETE

NAME

STREET ADDRESS

CITY-STATE-ZIP

TITLE

☐ DELETE

NAME

STREET ADDRESS

CITY-STATE-ZIP

TITLE

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STREET ADDRESS

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STREET ADDRESS

CITY-STATE-ZIP

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☐ DELETE

NAME

STREET ADDRESS

CITY-STATE-ZIP

TITLE

☐ DELETE

NAME

STREET ADDRESS

CITY-STATE-ZIP

TITLE

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE

NAME

STREET ADDRESS

CITY-STATE-ZIP

TITLE

NAME

STREET ADDRESS

CITY-STATE-ZIP

TITLE

NAME

STREET ADDRESS

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CITY-STATE-ZIP

TITLE

NAME

STREET ADDRESS

CITY-STATE-ZIP

TITLE

NAME

STREET ADDRESS

CITY-STATE-ZIP

SIGNATURE:

Shahrooz Banapoor

SHAHROOZ BANAPOOR

SIGNATURE AND TITLE OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

425-96

(407) 777-7528

CR2E034 (12/95)