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

PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

FILED May 05 1997 8:00am Secretary of State

1997	DIVISION OF CORPOR	ATION	2NS
DOCUMENT # J87694 LUCKY IN ENTERPRISES, INC.	(2)	1	
Principal Place of Business 9943 PINES BLVD PEMBROKE PINES FL 33024 US	Mailing Address 9643 PINES BLVD PEMBROKE PINES FL 33024-6100 US	A	THE REPORT OF THE PARTY OF THE
			3. Date Incorporated or Qualified 34. Date of Last Report 05/01/1996
2. Principal Place of Business 21	2a. Mailing Address 26		4. FEI Number Applied For 65-0013417 Not Applicable
Suite, Apt. #. etc. 22	Suite, Apt. #, etc.		5. Certificate of Status Desired \$8.75 Additional Fee Regulred
City & State	City & State		6. Election Campaign Financing \$5.00 May Be Trust Fund Contribution Added to Fees
7ip Country 25	Zip Cor 29 30	у	Florida Statutes Yes No
9. Name and Address of Current	Registered Agent	1_	10. Name and Address of New Registered Agent
KHAN, TARIQ 8790 S.W. 56 PLACE			Name
COOPER CITY FL 33328		32	Street Address (P.O. Box Number is Not Acceptable)
		83	
:		11	FL [1]
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.			

ature, type dior printed name of registered agent and title diapplicable OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 12. 13, Change T-TLF DELETE 1.1 TITLE KHAN, TARIQ 1.2 NAME NAME 8790 S.W. 58 PL. 1.3 STREET ADDRESS STREET ADDRESS COOPER CITY FL 1.4 CITY-ST-ZIP Dily-SI-ZiP DELETE 21 THLE Change Addition TOTLE KHAN, KHAUD 2.2 NAME NAME 8790 S.W. 56TH PLACE STREET ADDRESS 2.3 STREET ADDRESS COOPER CITY FL City - \$1 - 205 2.4 City-St-ZIP DELETE Change Addition 3.1 TITLE TILLE KHAN, LAURA 3.2 NAME NAMi 8790 SW 56 PLACE 3.3 STREET ADDRESS STHEFT ADDRESS **COOPER CITY FL** CHY-S1-20 3.4. CITY-ST-ZIP Change DELETE Addition HILL 4.1 TITLE NAME 4.2 NAME STREET ADDRESS 4.3 STREET ADDRESS 4.4 CITY-ST-ZIP CHY-S1-ZIP DELETE Change Addition THILE 5.1 TITLE 5.2 NAME NAME 5.3 STREET ADDRESS STREET ADDRESS 54 CITY-ST-ZIP CHTM - S1 - ZIP DELETE Change Addition 6.1 TITLE Title NAMi 6.2 NAME STREET ADDRESS 6.3 STREET ADDRESS 6.4 CITY-ST-ZIP CHY-ST 26

14. I do hereby certify that the information supplied with this filing does not quality 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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Daytimo Phone # 0133475