

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

PROFIT  
CORPORATION  
ANNUAL REPORT  
1996



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

DOCUMENT # J97611 (4)

1. Corporation Name

WINGATE PLAZA, INC.

Principal Place of Business

2600 NE 11 CT #4  
FT LAUDERDALE FL 33304

Mailing Address

2600 NE 11 CT #4  
FT LAUDERDALE FL 33304



2. Principal Place of Business

2a. Mailing Address

21 9941 SW 4th Street  
Suite, Apt. #, etc.

26 9941 SW 4th Street  
Suite, Apt. #, etc.

22 City & State

27 City & State

23 Plantation, FL  
Zip Country

28 Plantation, FL  
Zip Country

24 33324 25 USA

29 33324 30 USA

9. Name and Address of Current Registered Agent

HASAN, OSAMAH  
2600 NE 11 CT #4  
FT LAUDERDALE FL 33304

3. Date Incorporated or Qualified

10/16/1987

3a. Date of Last Report

06/12/1995

4. FEI Number

65-0020682

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

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 type for professional and of registered agent and if not applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

TITLE PD  
NAME KAHOK, NOFAL  
STREET ADDRESS 2400 E COMMERCIAL BLVD STE 204  
CITY-ST-ZIP FT LAUDERDALE FL ☐ DELETE

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP ☐ DELETE

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP ☐ DELETE

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP ☐ DELETE

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP ☐ DELETE

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP ☐ DELETE

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE P/ T/S/D ☒ Change ☐ Addition  
1.2 NAME Kahook, Nofal  
1.3 STREET ADDRESS 9941 SW 4th Street  
1.4 CITY-ST-ZIP Plantation, FL 33324

2.1 TITLE VP ☐ Change ☒ Addition  
2.2 NAME Kahook, Muntaha  
2.3 STREET ADDRESS 9941 SW 4th Street  
2.4 CITY-ST-ZIP Plantation, FL 33324

3.1 TITLE  
3.2 NAME  
3.3 STREET ADDRESS  
3.4 CITY-ST-ZIP ☐ Change ☐ Addition

4.1 TITLE  
4.2 NAME  
4.3 STREET ADDRESS  
4.4 CITY-ST-ZIP ☐ Change ☐ Addition

5.1 TITLE  
5.2 NAME  
5.3 STREET ADDRESS  
5.4 CITY-ST-ZIP ☐ Change ☐ Addition

6.1 TITLE  
6.2 NAME  
6.3 STREET ADDRESS  
6.4 CITY-ST-ZIP ☐ Change ☐ Addition

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), 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

3/6/96 (954) 771-3776  
Date Daytime Phone #

CR2E034 (12/95)