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PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State

DIVISION OF CORPORATIONS

1996

DOCUMENT #

K08271

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				AGNALII TALITA	11.10
PACFR	RESEARCH	K DEVEL	OPMENT	CONSULTANTS	. INC.

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Principal Place of	f Business	Mailing Address				-{ 	 	IIA WI S IA WIN	/II
1706 VESTAL DR CORAL SPRINGS FL 33071 US			1706 VESTAL DR CORAL SPRINGS FL 33071 US						
		00			3. Date Incorporated or Qualified 12/22/1987	3a. Date o	5/25/19		
2. Principal Place of Business 2a.		2a. Mailing Address	Mailing Address		4. FEI Number		<u> </u>	Applied For	
21 26		- 			65-0021455			Not Applicable	
Suite, Apt. #, etc 27		Suite, Apt. #, etc.	Suite, Apt. #, etc.		5. Certificate of Status Desired			Additional Required	
Crty & State 28		Oity & State	City & State		6. Election Campaign Financing Trust Fund Contribution			May Be d to Fees	
Zφ			ip Country		8. This corporation has liability for intangible tax under s 199.032,				
24	29	30			Florida Statutes Yes No 10. Name and Address of New Registered Agent				
	9. Name and Address of Current	Registered Agent		81	Name	10. Name and Address of New H	egistered A	jent	
				•'					
HAJIAN 1706 V			82	Street Addre	ss (P.O. Box Number is Not Acceptab	e)			
				83					
CORAL	SFRINGS FE 33071			В4	City		FL	85 Zip	o Code
or registered	the provisions of Sections 607.0502 d agent, or both, in the State of Florid , and accept the obligations of, Section	a. Such change was authorizi	ed by the c	ve n	amed corpora oration's board	tion submits this statement for the pur d of directors. I hereby accept the appo	pose of char pintment as r	ging its re egistered	egistered office agent. I am
SIGNATURE	-,	and this it as all sales	TE : Popultured	Acont	signature required	when reinstation	DATE		
12.	ignahire, typed or printed name of registered agent a OFFICERS AND		13.	ngani	. Signature of the control	ADDITIONS/CHANGES TO OFF		DIRECTO	RS IN 12
TITLE	PD	DELETE	1. 1 3	ITLE				Change	Addition
NAME	HAJIANPOUR, MOHAMED A	_	1.2 N/	AME					
STREET ADDRESS	1706 VESTAL DRIVE	•	1.3 ST	REET	ADDRESS				
CITY - ST - ZIP	CORAL SPRINGS FL		1.4 C)	TY-S1	r-zip				
TITLE	VPT	DELETE	2 1 T	ITLE) Change	☐ Addition
NAME	HAJIANPOUR, ZOYA		2.2 N	AME					
STREET ADDRESS	1706 VESTAL DRIVE		2.3 \$1	IREET	ADDRESS				
CITY-ST-ZIP	CORAL SPRINGS FL		2.4 C	TY - S1	T-ZIP				
TITLE	S	DELE TE	3.1 T	HLE			. [) Change	Addition
NAME	L'ATTA, LOREN		3.2 N	AME					
STREET ADDRESS	1706 VESTAL DRIVE		3 3 S	TREET	ADDRESS				ļ
CITY - ST - ZIP	CORAL SPRINGS FL			TY-S	T - ZIP			1 0	E 3 Address
TITLE	D	☐ DELETE	4. 1 T	ITLE			L.] Change	Addition
NAME	HOSSAIN MASNAVION MO	TLAGH	4.2 N						
STREET ADDRESS	1706 VESTAL DRIVE				ADDRESS				
CITY-ST-ZIP	CORAL SPRINGS FL	FOREST		ITY-S	T-21P			1 Change	Addition
TITLE		☐ DELETE	5.17				L] Change	[] Monitori
NAME .			5.2 N						
STREET ADDRESS					ADDRESS				ļ
CITY-\$1-ZIP		☐ DELETE		ITY-S	T-2IP			Change	Addition
TITLE			6 1 1				L) ondrigo	المالية
NAME			62 N		ADODGGG				
STREET ADDRESS					ADDRESS				l
City-St-ZiP	ce tify that the information supplied y	vith this filing is voluntarily form	6.4 0 nished and	doe	s not qualify for	or the exemption stated in Section 119	.07(3)(k), Flo	ida Statu	ites. I further

4. I do hereby ce-tify that the information supplied with this filing is voluntarily furnished and does not quality for the exemption stated in Section 119.07(3)(x), Florida Statutes, Turnier 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 enanged, or on an attachment with an address.

SIGNATURE:/

TURE AND AT PRINTED NAME OF SIGNING OFFICER ON DIRECTOR POW

4-22-96 1954345-6838

CR2E034 (12/95)