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

PROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # K2655

(8)

NAGEENA ENTERPRISES, INC.

FILED
Apr 02 1998 8:00am
Secretary of State



Principal Flace	OF BUSINESS	Maning Addre	188						
S AQUEELA H			% AOUEELA KHUDDUS						
2507 S. INDIAN RIVER DR. FT. PIERCE FL 34950 US			2507 S. INDIAN RIVER DR. FT. PIERCE FL 34950 US			DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified			
						06/15/1988			
2. Principal Pla	ace of Business	2a. Mailing Ac	idress			4. FEI Number		17	Applied For
21		26	26			65-0074859		I	ot Applicable
Suite, Apt.	r, etc.	Suite, Apt.	Suite, Apt. #, etc.			5 Octions of Course Course		\$8.75	Additional
22		27				5. Certificate of Status Desired		Fee f	Required
City & State	1	City & Sta	e			6. Election Campaign Financing	_	\$5.0	May Be
23		28				Trust Fund Contribution	<u></u>	Added	to Fees
Zip	Country	- h		Country		8. This corporation owes or has paid		,	
24	25	[29]	30			Personal Property Tax due June 30			No No
h-c	9, Name and Address of Curr	ent Registered Agen	ıt	81	N	10. Name and Address of New Regis	tered A	jent	
	IGER, GARY A			"	Name				
111 ORANGE AVE.				82 Street Address (P.O. Box Number is Not Acceptable)					
	. #300							•	
FII	PIERCE FL 34950			83					
				84	City			85 Zip	Code
							FL		
11. Pursuant to office or re	o the provisions of Sections 607.0 agistered agent, or both, in the Sta	502 and 607,1508, Flo ate of Florida, Such ch	orida Statutes, the lange was authoriz	above ed by	-named corp the corporal	poration submits this statement for the pur tion's board of directors. I hereby accept t	pose of d he appoi	hanging ntment a	its registered is registered
agent. 1 ar	n familiar with, and accept the obl	ligations of, Section 6	07.0505, Florida St	tatutes		,			•
SIGNATURE			0.016				DATE		
12.	Signature, typed or printed name of registered. OFFICERS A	AND DIRECTORS	INOIT Registe		nt signatura requi	ired when reinstating) ADDITIONS/CHANGES TO OFFICE		IBECTO	DRS IN 12
TITLE	PD			TITLE		7,55,7,6,76,76,76,76		Change	
NAME	KHUDDUS, AQUEELA			NAME	ŀ		_		
STREET ADDRESS	2507 S INDIAN RIVER DR				ADDRESS				
CITY-ST-ZIP	FT PIERCE FL			CITY-SI					
TITLE				TITLE				Change	☐ Addition
NAME			22	NAME				_	1
STREET ADDRESS					ADDRESS				
CITY-ST-ZIP				4 CITY-S	[ľ
TITLE				TITLE				Change	☐ Addition
NAME			32	NAME					
STREET ADDRESS			L.		ADDRESS				
CITY-ST-ZIP			3.4	CITY-S	T- 21P				1
TITLE				TITLE				Change	☐ Addition
NAME			4.4	2 NAME	J				J
STREET ADDRESS			4.3	STREET	ADDRESS				
CITY-\$1-ZIP				CITY-SI					
TITLE				TITLE				Change	☐ Addition
NAME			5.2	NAME					
STREET ADDRESS			5.3	STREET	ADDRESS				
CITY-ST-ZIP			54	CiTY-ST	T-ZIP				
TITLE				TITLE				Change	☐ Addition
NAME			6.2	NAME					
STREET ADDRESS					ADDRESS				
CITY-ST-ZIP				CITY-S!					

4. I hereby certify that the information supplied with this filing does not qualify 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 eath; 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:

Agualstandons

3-27-98

561-461-1291