

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

CORPORATION
ANNUAL REPORT
1995



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

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS

95 FEB 23 PM 3:18

DOCUMENT # **K43608**

(4)

1. Corporation Name

MIRZA PROPERTIES, INC.

Principal Place of Business

% WILLIAM A. BOYLES
201 E. PINE ST. #1200
ORLANDO FL 32801

Mailing Address

% WILLIAM A. BOYLES
201 E. PINE ST. #1200
ORLANDO FL 32801

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

10/31/1988

3a. Date of Last Report

02/11/1994

4. FEI Number

59-2937433

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

2. Principal Place of Business

21

Suite, Apt. #, etc.

22

City & State

23

Zip

Country

24

25

2a. Mailing Address

26

Suite, Apt. #, etc.

27

City & State

28

Zip

Country

29

30

9. Name and Address of Current Registered Agent

BOYLES, WILLIAM A.
201 E. PINE ST.
#1200
ORLANDO FL 32801

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 president or principal officer of corporation or registered agent (if applicable)

Signature of agent (if agent is not a corporation or partnership)

11/11

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE

PST
MIRZA, IQBAL M.
8875 S. HWY 17-92
MAITLAND FL

11 TITLE

☐ Change ☐ Addition

NAME

12 NAME

STREET ADDRESS

13 STREET ADDRESS

CITY, ST, ZIP

14 CITY, ST, ZIP

TITLE

D
MIRZA, IQBAL M.
8875 S. HWY 17-92
MAITLAND FL

21 TITLE

☐ Change ☐ Addition

NAME

22 NAME

STREET ADDRESS

23 STREET ADDRESS

CITY, ST, ZIP

24 CITY, ST, ZIP

TITLE

31 TITLE

☐ Change ☐ Addition

NAME

32 NAME

STREET ADDRESS

33 STREET ADDRESS

CITY, ST, ZIP

34 CITY, ST, ZIP

TITLE

41 TITLE

☐ Change ☐ Addition

NAME

42 NAME

STREET ADDRESS

43 STREET ADDRESS

CITY, ST, ZIP

44 CITY, ST, ZIP

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51 TITLE

☐ Change ☐ Addition

NAME

52 NAME

STREET ADDRESS

53 STREET ADDRESS

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54 CITY, ST, ZIP

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61 TITLE

☐ Change ☐ Addition

NAME

62 NAME

STREET ADDRESS

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64 CITY, ST, ZIP

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71 TITLE

☐ Change ☐ Addition

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72 NAME

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73 STREET ADDRESS

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74 CITY, ST, ZIP

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81 TITLE

☐ Change ☐ Addition

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82 NAME

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83 STREET ADDRESS

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84 CITY, ST, ZIP

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91 TITLE

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92 NAME

STREET ADDRESS

93 STREET ADDRESS

CITY, ST, ZIP

94 CITY, ST, ZIP

TITLE

101 TITLE

☐ Change ☐ Addition

NAME

102 NAME

STREET ADDRESS

103 STREET ADDRESS

CITY, ST, ZIP

104 CITY, ST, ZIP

TITLE

111 TITLE

☐ Change ☐ Addition

NAME

112 NAME

STREET ADDRESS

113 STREET ADDRESS

CITY, ST, ZIP

114 CITY, ST, ZIP

SIGNATURE:

Iqbal M. Mirza

Iqbal M. Mirza

2/18/95

407-645 0922

SIGNATURE AND TYPE OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR