

SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER SEPTEMBER 17, 1997.
AMOUNT DUE ON OR BEFORE 9/17/97: \$550 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$750.)

FILED
Aug 06 1997 8:00am
Secretary of State

PROFIT CORPORATION ANNUAL REPORT 1997		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # **K72134 (5)**
1. Corporation Name
WASSIF SULEIMAN INTERNATIONAL CORPORATION



Principal Place of Business
**2202 DISCOVERY CIRCLE WEST
DEERFIELD BEACH FL 33442**

Mailing Address
**2202 DISCOVERY CIRCLE WEST
DEERFIELD BEACH FL 33442**

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business 21 555 Jefferson Drive Suite, Apt. #, etc. 22 1-108 City & State 23 Deerfield Beach Zip 24 33442 Country 25 USA		2a. Mailing Address 26 555 Jefferson Drive Suite, Apt. #, etc. 27 1-108 City & State 28 Deerfield Beach Zip 29 33442 Country 30 USA		3. Date Incorporated or Qualified 03/07/1989	3a. Date of Last Report 03/15/1996
				4. FEI Number 65-0129032	Applied For <input type="checkbox"/> Not Applicable
				5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required
				6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/>	\$5.00 May Be Added to Fees
				8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. <input type="checkbox"/> Yes <input type="checkbox"/> No	

9. Name and Address of Current Registered Agent

**SULEIMAN, LAURENCE M
2202 DISCOVERY CIRCLE WEST
POMPAHO BEACH FL 33064**

10. Name and Address of New Registered Agent

81 Name
Elisabeth Suleiman
82 Street Address (P.O. Box Number is Not Acceptable)
555 Jefferson Drive Apt 1-108
83
84 City
Deerfield Beach FL 85 Zip Code
33442

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 **E. Suleiman President and MD** DATE **7/30/97**
Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when resigning)

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	P <input type="checkbox"/> DELETE	1.1 TITLE	President <input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	SULEIMAN, ELISABETH	1.2 NAME	Elisabeth Suleiman
STREET ADDRESS	2202 DISCOVERY CIR. W.	1.3 STREET ADDRESS	555 Jefferson Drive Apt 1-108
CITY-ST-ZIP	POMPAHO BCH. FL	1.4 CITY-ST-ZIP	Deerfield Beach FL 33442
TITLE	MD <input checked="" type="checkbox"/> DELETE	2.1 TITLE	MD <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	SULEIMAN, MISS LAURENCE	2.2 NAME	Elisabeth Suleiman
STREET ADDRESS	2202 DISCOVERY CIRCLE W	2.3 STREET ADDRESS	555 Jefferson Drive Apt 1-108
CITY-ST-ZIP	POMPAHO BEACH FL	2.4 CITY-ST-ZIP	Deerfield Beach 33442
TITLE	<input type="checkbox"/> DELETE	3.1 TITLE	
NAME		3.2 NAME	
STREET ADDRESS		3.3 STREET ADDRESS	
CITY-ST-ZIP		3.4 CITY-ST-ZIP	
TITLE	<input type="checkbox"/> DELETE	4.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		4.2 NAME	
STREET ADDRESS		4.3 STREET ADDRESS	
CITY-ST-ZIP		4.4 CITY-ST-ZIP	
TITLE	<input type="checkbox"/> DELETE	5.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		5.2 NAME	
STREET ADDRESS		5.3 STREET ADDRESS	
CITY-ST-ZIP		5.4 CITY-ST-ZIP	
TITLE	<input type="checkbox"/> DELETE	6.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		6.2 NAME	
STREET ADDRESS		6.3 STREET ADDRESS	
CITY-ST-ZIP		6.4 CITY-ST-ZIP	

14. I do 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 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.

CR2E034 (4/97)