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PROFIT CORPORATION **ANNUAL REPORT**

1997



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

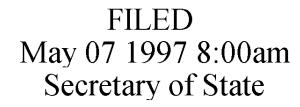
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(8)

M.B.M. LES SAVOIE, INC.

Principal Place of Business

Mailing Address





10185 COLLINS BAY HARBOR I		10185 COLLINS AVE. #601 BAY HARBOR FL 33154-1631								
						3. Date Incorporated or Qualified 04/21/1989	3a. Date of Last Report 07/02/1996			
	ace of Busines	2a. Mailing				- 	4. FEI Number	J	Ar	pplied For
21 170	to collingtin	26	300	^e_			65-0454447			ot Applicable
Suite, Apt.	#, etc.		pt.#, elc.				5. Certificate of Status Desired		\$8.75	
22		27	Na a							equired
City & State	~ `\	City & 5	siate				Election Campaign Financing Trust Fund Contribution		00.2\$	May Be to Fees
Zip	Country	Zip		Cou	ntry		8. This corporation has liability for			
Zip 33 1	60) 25 Da J	29		30	•			Yes [. 150.002
	9. Name and Address of Curren		gent			·	10. Name and Address of New Re	gistered	Agent	
RAH	eb, babak				81	Name				
1018	85 COLLINS AVE #601				82	Street Addr	ress (P.O. Box Number is Not Acceptal	ole)		
BAY	HARBOR ISLAND FL 33154									
					83	·				
					84	City			85 Zip	Code
						-		FL	. `	
office or re agent. I as SIGNATURE.	egistered agent, or both, in the State m familiar with, and accept the obliga-	of Horida. Such ations of, Section	change was n 607.0505, F	authorize Iorida Stat	d by utes	the corporat	poration submits this statement for the tion's board of directors. I hereby acce	pt the app	ointment as	registered
	Signature, typed or printed name of registered age		c (NC		J Ago	nt signature requi	red when reinstating)	DATE		
12.	OFFICERS AND	DIRECTORS	DELETE	13.			ADDITIONS/CHANGES TO OFFI	CERS AND	DIRECTOR Change	Addition
TITLE	PAHLAVANIAN, PARVIN		[_] DITLIE	111					☐ Change	[] Addition
NAME	10185 COLUNS AVE #601			1.2 N/		- Marier on				
STREET ADDRESS	BAY HARBOR ISL. FL					ADDRESS				
CITY-ST-ZIP TITLE	DV		DELETE	1.4 CI 2.1 II		T-7IP			Change	Addition
NAME	RAHEB, BABAK			2.2 N						
STREET ADDRESS	128 BALFOUR DRIVE					ADDRESS				
CITY-ST-ZIP	BAY HARBOR ISL. FL			2.40						
TITLE	DS		DELETE	311		31 - 211			Change	Addition
NAME	RAHEB, MITRA			3 2 N	AM[
STREET ADDRESS	10185 COLLINS AVE #601			335	IREET	ADDRESS				
CITY-ST-ZIP	BAY HARBOR ISL. FL			3.4.0	aty-S	ST - ZIP				
TITLE	DT		☐ DELETE	411	TLI				☐ Change	Addition Addition
NAME	RAHEB, MOHAMMAD			4 2 N	AME					
STREET ADDRESS	10185 COLLINS AVE #601	•		4.3 S	TREET	ADDRESS				
CITY-ST-ZIP	BAY HARBOR ISL. FL			4.4 C	ITY - S	T-ZIP				
TITLE			☐ DELETÉ	5.1 TI	TLE				Change	Addition
NAME				5.2 N						
STREET ADDRESS				5.3 S	TRFET	ADDRESS				
CITY-ST-ZIP			D proces			I - ZIP			- T-7 CL	Aaaa
TITLE			DEFELE	6.1 1					☐ Change	Addition
NAME				6.2 N						
STREET ADDRESS		·)		1 1		ADDRESS				
CITY-ST-ZIP	l	 	Hono not a			T-ZiP	d in Section 119.07(3)(i), Florida Statut	ne Hurtha	r codify that	L the
information information in am an o appears i	by certify mat the mormation stipplie on indicated on this annual report of officer or director of the corporation of in Block 12 or Block 13 if chapard, o	supplemental ar the receiver of r on an attachin	nual report is trustee empo entwith an a	s true and owered to o ddress.	acci exec	urate and tha cute this repo	d in Section 179.07(2)(), Florida Statut Il my signature shall have the same leg ort as required by Chapter 607, Florida	al effect a Statutes; a	s if made ur and that my	idor oath; th name