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 # K82735 (7) ANGORA, INC.							
Principal Place	e of Business	Mailing Address				1411 41411 411	
C/O SAFET BAKRAC 4946 - 4TH ST. NORTH ST. PETERSBURG FL 33703		C/O SAFET BAKRAC 4946 - 4TH ST. NORTH ST. PETERSBURG FL 33703			DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified		
2. Principal Place of Business 2a. Mailing Address					04/24/1989 4. FEI Number		
21. Principal P.	ido d o i business	<u></u>	26		59-2947458		oplied For ot Applicable
Sulte, Apt.	#, etc.	Suite, Apt. #, etc.			5. Certificate of Status Desired		Additional
22		27	↓		5. Certificate of Status Desired	Fee R	equired
City & State		City & State			6. Election Campaign Financing Trust Fund Contribution		May Be
23] Zip			Countr	v	Trust Fund Contribution 8. This corporation owes or has paid the currently the currently that the currently		to Fees
24	25	29	30	•	Personal Property Tax due June 30.	Yes [∐ No
	g. Name and Address of Curr	ent Registered Agent			10. Name and Address of New Registered A	gent	
	KRAC, SAFET		81	Name			
4946 - 4TH ST. NORTH			82	Street Ad	dress (P.O. Box Number is Not Acceptable)		
ST. PETERSBURG FL 33703			83	3		-	
			84	1 City		les Zin	Code
				,	<u>FL</u>]	
11. Pursuant to the provisions of Sections 607.0502 and 607.0508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its 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 r agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.						ts registered registered	
SIGNATURE						<u> </u>	
12.	Signature, typed or printed name of registered a OFFICERS A	gent and tale if applicable (NOT ND DIRECTORS	Registered A	gent signature rec	ADDITIONS/CHANGES TO OFFICERS AND	DIRECTOR	3S IN 12
TITLE			1.1 TITLE			Change	Addition .
NAME	BAKRAC, SAFET		1.2 NAME				
STREET ADDRESS	49 46 4 ST. N.		1.3 STAEE	1 ADDRESS			
CITY-ST-ZIP	ST PETE FL			SI - ZIP		Change	Addition
TITLE NAME	M Bakrac, Sahib		2.1 HTLE 2.2 NAME			Unange	☐ Addition
STREET ADDRESS	255 8 AVE. N.			T ADDRESS			
CITY-ST-ZIP	AT ALLER OF		2. 4 CITY				
TITLE		DFLETE	3.1 TITLE			Change	Addition
NAME	•		3.2 NAME				
STREET ADDRESS				T ADDRESS			
CITY-ST-ZIP TITLE		DELETE	3.4. CITY	-SI-ZIP		Change	Addition
NAME			4. 2 NAM		•		
STREET ADDRESS			4	T ADDRESS			l
CITY-ST-ZIP			4.4 CITY-	ST-ZIP			
TITLE		☐ DELETE	5.1 TITLE			Change	Addition
NAME			5.2 NAME	1			
STREET ADDRESS				T ADDRESS			ļ
CITY-ST-ZIP TITLE		☐ D£LETE	5.4 CITY - 6.1 TITLE	31-ZIP		Change	Addition
NAME		—	6.2 NAME		•		
STREET ADDRESS				T ADDRESS			
CITY-ST-ZIP			6.4 CITY-	ST - ZIP			
44	cardifications than information a constraint	suide de la ligration de la laction de la constitue de	or the eve	ntion state of	in Continue 110 07/31// Florida Ctatutas, Liberthan and	بالالمطابية	information 1

Thereby 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 trusted empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 13 if changed, of on an attachment with an address.

04-27-98

FILED

May 01 1998 8:00am

Secretary of State