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

PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State

DIVISION OF CORPORATIONS

1996

K86536

(5)

DOCUMENT #

1. Corporation Name

ROMBAY BAZAAR INC.

DOMO:	AT DAZAATI IIIO					
Principal Place of	of Business	Mailing Address	······································			ITIIR Att Dinis Albis Arbis Ander Arbis Annes sans
11301 S. ORANGE BLOSSOM TRAIL 11301 S. ORANGE BLOS ORLANDO FL 32837 ORLANDO FL 32837				RAIL		
					 Date Incorporated or Qualified 05/01/1989 	3a. Date of Last Report 01/13/1995
Principal Place of Business 2a. Malling Address					4. FEI Number	Applied For
1		26	<u> </u>		59-2947472	Not Applicable \$8.75 Additional
Suite, Apt. #, etc.		Suite, Apt. #, etc.	Suite, Apt. #, etc.		5. Certificate of Status Desired	Fee Required
City & State		City & State			Election Campaign Financing Trust Fund Contribution	\$5.00 May Be Added to Fees
Zip	Country	Zip	Cour	ntry	8. This corporation has fiability for	
24	25	29	30		Florida Statutes	Projetered Agent
	9. Name and Address of Curre	nt Registered Agent		81 Name	10. Name and Address of New	Andre ED.
CHOIR	DHURY ANWAR				Address (P.O. Box Number is Not Accept	/// /
11304	S. ORANGE BLUSSOM TRAIL		1	82 Street	2732 BAYLET	FDr.
	DO-FL 32837			83	delas.	FC
1				84 City	OPIAN NO	85 Zip Code
					OR OFF 20,	PL 90097
11. Pursuant to	o the provisions of Sections 607.050 and agent, or both, in the State of Flo)2 and 607.1508, Florida Sta rida. Such change was autho	itutes, the abo orized by the c	corporation's	orporation submits this statement for the place of directors. I hereby accept the accept	pointment as registered agent. I am
familiar with) // - //	_ U . cov . 1	ites.		same ah	126/96
SIGNATURE]	Signature, typed or creited name of registered age	and gittle if applicable	(NOTE: Registered	Agent signature r	equired when reinstating)	DATE
12.	OFFICERS A	ND DIRECTORS	13.		ADDITIONS/CHANGES TO O	FFICERS AND DIRECTORS IN 12 Change Addition
TITLE	DP AND	DELETE	1 1 1		SHAMSULI.	HMED Change Addition
NAME	CHOUDHURY, ANWAR 11391 S. ORANGE BLOSS	eou .	1.2 N	ame Treet adoress	2232 BAYLEAF	Dr.
STREET ADDRESS	ORLANDO PL 32837	DOM		HY-SI-ZIP	Orlando, FZ	32837
CITY-ST-ZIP TITLE		ALMOS DELETE	2 1 1		SHAHIDIN T A	Change Addition
NAME	SHAHIDUL I. 1		22 N	AME	2232 BAY LEAF	Dr. in proof
STREET ADDRESS		32837	1	TREET ADDRESS	Colo. 5 325	322
CITY-ST-ZIP	7	C DELETE	2.4 C 3.11	ITY - ST - ZIP	Parin 15 611 101	Change Addition
TITLE	RAZIA K. CHO	NOHN RY DELETE	3.1 N		KAZIA KSCHOUDE	viey =
NAME STREET ADDRESS	2771 MUSCAT	ELLO ST		STREET ADDRESS	2771 MUSCATELLO	St. SEchatory
City-St-ZiP	Ortobodo, FC	- 32837	3.4 0	ITY-ST-ZIP	Estano, PC 3	2037 /
TITLE	MOHAMAIED A-	IGLAM DELETE	4.1	TITLE	MOHAMANER-A. 19	CAM Charge Addition
NAME	2771 Muscate	110 10	1	IAME	2771 muscatello st	
STREET ADORESS	Orlow FZ			STREET ADDRESS	Orlando, Fz	_ '
CITY-SI-ZIP	CHOOL PC	DELETE		CHY-ST-ZIP TITLE		Charge Addition
TITLE NAME			1	NAME		
STREET ADDRESS			5.3 \$	STREET ADDRESS		
CITY-S1-ZIP			541	DITY-ST-ZIP		Chause
TITLE		☐ DELETE		TITLE		☐ Charige ☐ Addition
NAME			1	NAME Proces address		
STHEET ADDRESS				STREET ADDRESS City-St-Zip		
CITY-ST-ZIP	by certify that the information supplie	ed with this filing is voluntarily	. f alacal and	door not a	Jalify for the exemption stated in Section 1	19.07(3)(k), Florida Statutes. I further
certify that	at the information indicated on this at t I am an officer or director of the co in Block 12 or Block 13 if changed, o	nnual report or supplemental receiver or ti	rustee empow	is true and a ered to execu	occurate and that my signature shall have ute this report as required by Chapter 607	rine same legal effect as it made under , Florida Statutes; and that my name