## FILE NOW: FILING FEE AFTER MAY 1 IS \$550.00

PROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

## Sandra B. Mortham

Secretary of State
Division OF CORPORATIONS

## DOCUMENT # L81363

(8)

BISMILLAH ENTERPRISES, INC.

Principal Place of Business Mailing Address 8775 SW 72ND STREET 8775 SW 72ND 1			TREET							
8775 SW 72ND ST. MIAMI FL 33173 US		8775 SW 72ND ST.								
						3. Date Incorporated or Qualified			Report	
2. Principal P	2a. Mailing Address	Address			4. FEI Number			pplied For		
21		26				65-0212356			ot Applicable	
Suite, Apt	#, etc	Suite, Apt. #, etc.	<del></del>			5. Certificate of Status Desired		¥	Additional equired	
City & Stat	С	City & State	······································			Election Campaign Financing     Trust Fund Contribution	П		May Be to Fees	
<b>23</b>	Country	28 Z <sub>I</sub> p	Cour	ntry		8. This corporation has liability				
24	25	29	30			Florida Statutes	Yes	□ No		
	9. Name and Address of Curre	ent Registered Agent				10. Name and Address of New	Registered	Agent		
	rai, shaukatali			<b>81</b> Na	ame				3	
	5 SW 72ND ST.		Ţ	<b>82</b> Sti	eet Addre	ss (P.O. Box Number is Not Accep	itable)			
MIA	MI FL 33173		}	<b>B3</b>						
			ļ	84 Ci	<u> </u>			ler I Zin	Code	
				84 Ci	ıy		FL	85 Zip	Code	
office or in agent. I a	to the provisions of Sections 607.05 registered agent, or both, in the Sta rri familiar with, and accept the oblined the section of the section of the section of the section of the provision of	igations of, Section 607.0505, F	lorida Stati	utes.		ration submits this statement for trun's board of directors. I hereby ac	cept the ap	ocintment as	ts registered	
12.	Signature, typed or perilod name of registered a OFFICERS A	ND DIRECTORS	13.	Agent sig	Mature required	ADDITIONS/CHANGES TO OF		D DIRECTOL	RS IN 12	
TILLE	DP OF TOURING	DELETE	1.1 717	LE	<del></del>	ABBITOTOTOTOTOTO TO OF	10210781	Change	Addition	
NAME	KERAI, SHAUKATALI		1.2 NA	ME	Ì					
STHEFT ADDRESS	9500 SW 79TH ST		1.3 ST	REET ADDR	(ESS					
City-St-ZiP	MIAMI FL			IV-ST-ZIP		·		T labore	1 1 1 1 1 1 1 1 1	
Title	dst Kerai, Shehnaz	L DELETE	2111					[_] Change	Addition	
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CITY-S1-ZIP	MIAMI FL			TY-ST- <i>Z</i> IF						
TITLE		DELETE	3.1 717		1			☐ Change	Addition	
NAME			3,2 NA	ME						
STREET ADDRESS			3.3 ST	reet adda	IESS					
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STREET ADORESS				reet addf	ess					
CITY - ST - 7IP				IY-ST-ZIP						
TITLE		DELETE	5.1 TI				···············	Change	Addition	
NAMÉ			5.2 NA	ME						
STREET ADDRESS			5.3 ST	reet addf	iess				ļ	
City - St - ZiP				TY-ST-ZIP	<u> </u>			<b></b>		
TILE		DELETE	6.1 111		l			Change	Addition	
NAME			6.2 NA							
STREET ADDRESS				REET ADDE						
Priv St. 7.5	1			LV CT 710	4 1					

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 roceiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 12 or Block V if changed, or on an attachment with an address.

SIGNATURE.

MINCHAI SHAUKA TAL

4/20/9

(305)279-465

**FILED** 

Apr 29 1997 8:00am

Secretary of State