

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

PROFIT
CORPORATION
ANNUAL REPORT
1996



FLORIDA DEPARTMENT OF STATE
Sandra B. Morham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # **L82966**

(7)

1. Corporation Name

UNIVERSAL WATCHES, INC.



Principal Place of Business

STORE NO. 8
8 S.E. FIRST AVE
MIAMI FL 33131

Mailing Address

STORE NO. 8
8 S.E. FIRST AVE.
MIAMI FL 33131

2. Principal Place of Business

2a. Mailing Address

21 Suite, Apt. #, etc.

26 Suite, Apt. #, etc.

22 City & State

27 City & State

23 Zip Country

28 Zip Country

24 Zip Country

29 Zip Country

9. Name and Address of Current Registered Agent

**FRIED, MARK E.
25 S.E. 2ND AVE.
SUITE 1135
MIAMI FL 33131**

3. Date Incorporated or Qualified
06/26/1990

3a. Date of Last Report
02/28/1995

4. FEI Number

65-0204646

Applied For

Not Applicable

5. Certificate of Status Desired

☐

**\$8.75 Additional
Fee Required**

6. Election Campaign Financing
Trust Fund Contribution

☐

**\$5.00 May Be
Added to Fees**

8. This corporation has liability for intangible tax under s. 199.032,
Florida Statutes ☐ Yes ☐ No

10. Name and Address of New Registered Agent

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)

83

84 City

FL

85 Zip Code

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

Signature of registered agent and board of directors (if applicable)

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

12.1 TITLE ☐ DELETE

NAME
USMAN, MOHAMMED HANIF
52 S.E. 1ST ST.
MIAMI FL

12.2 TITLE ☐ DELETE

NAME
GAZIANI, ABDUL QADIR
48 E. FLAGLER ST., #15A
MIAMI FL

12.3 TITLE ☐ DELETE

NAME

12.4 TITLE ☐ DELETE

NAME

12.5 TITLE ☐ DELETE

NAME

12.6 TITLE ☐ DELETE

NAME

12.7 TITLE ☐ DELETE

NAME

12.8 TITLE ☐ DELETE

NAME

12.9 TITLE ☐ DELETE

NAME

12.10 TITLE ☐ DELETE

NAME

12.11 TITLE ☐ DELETE

NAME

12.12 TITLE ☐ DELETE

NAME

12.13 TITLE ☐ DELETE

NAME

12.14 TITLE ☐ DELETE

NAME

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

13.1 TITLE ☐ Change ☐ Addition

13.2 NAME

13.3 STREET ADDRESS

13.4 CITY - ST - ZIP

13.5 TITLE ☐ Change ☐ Addition

13.6 NAME

13.7 STREET ADDRESS

13.8 CITY - ST - ZIP

13.9 TITLE ☐ Change ☐ Addition

13.10 NAME

13.11 STREET ADDRESS

13.12 CITY - ST - ZIP

13.13 TITLE ☐ Change ☐ Addition

13.14 NAME

13.15 STREET ADDRESS

13.16 CITY - ST - ZIP

13.17 TITLE ☐ Change ☐ Addition

13.18 NAME

13.19 STREET ADDRESS

13.20 CITY - ST - ZIP

13.21 TITLE ☐ Change ☐ Addition

13.22 NAME

13.23 STREET ADDRESS

13.24 CITY - ST - ZIP

13.25 TITLE ☐ Change ☐ Addition

13.26 NAME

13.27 STREET ADDRESS

13.28 CITY - ST - ZIP

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), 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.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

MOHAMMED USMAN

02/01/96

(305) 539-9142

Date

Daytime Phone #

CR2E034 (12/95)