ANNUAL REPORT ANNUAL REPORT 1999 FILING FEE Annual Report \$100.00 + \$88.75 Corporation Supplemental Fee \$ 188.75 Make Check Payable To: FLORIDA DEPARTMENT OF STATE 1. Name and Mailing Address DOCUMENT # 1.9300000301				99 MAY 20 MI 9: 12 SECLAMASSAE, FLORIDA		
2 Princip	at Place of Business	2a. Mailing Address C/O P.O. Box 17 Suite, Apt. W. etc.	ng Address 3		d or Qualified	3a. State of Formation
Suite, Apt		City & Statey	4. FEI Number 59–319			Applied For Not Applicable
Ζιρ	Country	To de NOO / 200 /	rminole	5. Date of Last R 03/13/1	·	6. Certificate of Status Desired \$8.75 Additional Fee Required
9. Pursuits registe			Suite, Apt. #, etc. 7058 City Wind HUS Socious Authorized by affirmative af	CITAUS PORTER PARISONALI Liability company sulve vote of a majority	INT Co	ZIP Code 32 792-756 :
10. Title	Managing Members/Manager		Business Street Address		City, State and Zip Code	
MGR MGR MGR	MIRZA, EBRAHIM M MIRZA, HASSAN M MIRZA, IQBAL M				MAITEAND FL . OF MAITLAND FL MAITLAND FL	
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indicated liab	reby certify that the information supplied won this annual report is true and accurate olity company or the receiver or trustee er at with an address.	and that my signature shall have the	same legal effect as	ction 119.07(3) (i), F if made under oath,	本本本分 A.J. 点 lorida Statutes. that I am a mar	*188.75 ****188. PR 2 7 1999. Hurther certify that the information aging member of manager of the