FILE NOW: FILING FEE AFTER MAY 1 IS $225.00

CORPORATION ANNUAL REPORT 1995

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

APPROVED AND FILED
95 MAY -1 PM 5:36
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # M65122 (7)

1. Corporation Name
ASHAL, INC.

Principal Place of Business
C/O WILLIAM WATSON TRICK, JR.
660 S. FEDERAL HWY., 3RD FLOOR
POMPANO BEACH FL 33062

Mailing Address
C/O WILLIAM WATSON TRICK, JR.
660 S. FEDERAL HWY., 3RD FLOOR
POMPANO BEACH FL 33062

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified: 01/19/1988
3a. Date of Last Report: 05/01/1994
4. FEI Number: 65-0041883 — 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

2. Principal Place of Business
21 GRILLS MARKET
Suite, Apt. #, etc.
22 2066 NE 2ND ST.
City & State
23 DEERFIELD BCH, FL.
24 Zip 33441 25 Country BROWARD

2a. Mailing Address
26 C/O SHAFI MAJID
Suite, Apt. #, etc.
27 2066 NE 2ND ST.
City & State
28 DEERFIELD BCH, FL.
29 Zip 33441 30 Country BROWARD

9. Name and Address of Current Registered Agent
TRICK JR., WILLIAM WATSON
660 S. FEDERAL HWY.
3RD FLOOR
POMPANO BEACH FL 33062

10. Name and Address of New Registered Agent
81 Name: SHAFI MAJID
82 Street Address (P.O. Box Number is Not Acceptable): 2066 NE 2ND ST.
83 DEERFIELD BEACH,
84 City — FL 85 Zip Code 33441

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] SHAFI MAJID VP 4-28-95

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	PD	11 TITLE	PD
NAME	MAJID, AFZAL	12 NAME	MAJID, AFZAL
STREET ADDR.	2030 NE 2 ST.	13 STREET ADDRESS	2066 NE 2ND ST
CITY-ST	DEERFIELD BCH. FL	14 CITY-ST-ZIP	DEERFIELD BCH, FL. 33441
TITLE	VPD	21 TITLE	VPD
NAME	MAJID, SHAFI	22 NAME	MAJID, SHAFI
STREET ADDR.	2030 NE 2 ST.	23 STREET ADDRESS	2066 NE 2ND ST.
CITY-ST	DEERFIELD BCH. FL	24 CITY-ST-ZIP	DEERFIELD BCH, FL. 33441
TITLE	~~TSD~~	31 TITLE	
NAME	~~NAVIWALA, ASHRAF~~	32 NAME	
STREET ADDR.	~~C/O 2030 NE 2 ST.~~	33 STREET ADDRESS	→ DELETE
CITY-ST	~~DEERFIELD BCH. FL~~	34 CITY-ST-ZIP	
TITLE		41 TITLE	
NAME		42 NAME	
STREET ADDR.		43 STREET ADDRESS	
CITY-ST		44 CITY-ST-ZIP	
TITLE		51 TITLE	
NAME		52 NAME	
STREET ADDR.		53 STREET ADDRESS	
CITY-ST		54 CITY-ST-ZIP	
TITLE		61 TITLE	
NAME		62 NAME	
STREET ADDR.		63 STREET ADDRESS	
CITY-ST		64 CITY-ST-ZIP	

14. I 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), 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] — SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — 4-28-95 — 305-427-4010

0104678 CP