SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER SEPTEMBER 15, 1999. AMOUNT DUE ON OR BEFORE 09/15/99: \$550 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$750).

PROFIT CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State **DIVISION OF CORPORATIONS**

DOCUMENT # M95957

CHAUDHRY, INC.

FILED Sep 20, 1999 8:00 am Secretary of State

09-20-1999 90005 039 ***550.00



Fillicipal Flac	e or business	Maining Address									
% FARIDA M. (3808 E. 3RD S		712 W 15TH ST PANAMA CITY FL 32401									
PANAMA CITY FL 32401-5671 US					<u> </u>	DO NOT WRITE IN THIS SPACE					_
				- 1	3. Date Incorporated or Qualified						
)8/ <u>23/1988 </u>					Ĺ
2. Principal P	lace of Business				4. FEI Number						
21 712 W. 15 St. 26						59-2903787				Not Applicable	٦
Suite, Apt. #, etc. Suite, Apt. #, etc.									\$8.7	5 Additional	٦
22				5. Certificate of Status Desired				Fee	Required		
City & State City & State					6 F	lection Campai	on Financino	_	\$5.0)0 May Be	٦
23 Renama City Florida 28						Trust Fund Contribution Added to Fees					
Zip Country		Zip Country					nt vear			1	
24 324		29 30			8. This corporation owes the current year Intangible Personal Property.						
24 327	9. Name and Address & Current			r		Name and Addr			=:	<u> </u>	4
	5. Maine and Address & Current	Kodisteran Wasiit		81 Name	71-7 ·	A A	.4	<u> </u>	Agent /		┪
CHA	UDHRY, FARIDA M.			Maine	(Sh.)	Mughis	<i>H</i> - (Chai	idhr	4	
			82 Street	Address (P.C	D. Box Number,	s Not Acceptat	ole)	- 6	7	7	
3808 E. 3RD ST. PANAMA CITY FL 32404					<u> </u>	10.1.	<u>>=5+</u>				_
PAN	AMA CITT FL 32404		83								
				84 City /	, 	7.7		,	85 Z	ip Code	\dashv
				84 City	gn an a	City	Harried	´ FL	_ 65 5	2001	
11. Pursuant	to the provisions of sections 607.0502	and 607.1508. Florida Statute	s, the ab	ove-named o	corporation su	bmits the state	nent for the pur	pose of cl	hanging its	registered	7
office or	to the provisions of sections 607.0502 registered agent, or both, in the State of am familiar with, and accept the obligat	of Florida Such change was a	uthorize	d by the corp	oration's boa	ard of directors. I	hereby accept	the appoi	intment as	registered	
		lions of section 607,0005. Fit	orida Star	lutes.	•			Q	-11-	99	
SIGNATURE	Signature, typed or profited name of registered agent	and title if annicable (N)	TF: Region	and Ament signals	re required when a	reinstatina)		DATE	// /		
12.	OFFICERS AND		13.			DITIONS/CHAI	IGES TO OFF	ICERS AN	ND DIREC	TORS IN 12	100
TITLE	D	DELETE	1.1 TI	TIF					Chang		7
	CHAUDHRY, FARIDA M.	<u> </u>	1.2 NA		Mohow	wed A W. 15th	. Chaud	<i>ት</i> / ሃ	L Criang	e	3
NAME					711	111 151	· Š+-	Ø			VCOTCO
STREET ADDRESS	712 W 15TH ST			REET ADDRESS	//_	0, 00	Ε/	2 2	UDI		Š
CITY-ST-ZIP	PANAMA CITY FL			TY-ST-ZIP	Pano	ma City	, 	برد			۲ ۲
TITLE	D	DELETE	2.1 🏗	TLE]	U	•		Chang	e Addition	
NAME	CHAUDHRY, MUZAFFAR A.		2.2 N/	ME	ĺ						ļ
STREET ADDRESS	712 W 15TH ST		2.3 ST	REET ADDRESS							
CITY-ST-ZIP	PANAMA CITY FL	/	2.4 CF	TY-ST-ZIP							1
TITLE	D	DELETE	3.1 Ti	ΠE			· 		Chang	e Addition	1
NAME	CHAUDHRY, MOHAMMED S.		3.2 NA	ME							
STREET ADDRESS	3103 LANNY LANE		33 ST	REET ADDRESS							İ
J	PANAMA CITY FL	,		TY-ST-ZIP							1
CITY-ST-ZIP TITLE	D	DELETE	4.1 TI	-					[] [A	-
i		[▼] DELETE	1						Chang	e Addition	1
NAME	CHAUDHRY, IRSHAD		4.2 NA								ł
STREET ADDRESS	3103 LANNY LANE			REET ADDRESS							
CITY-ST-ZIP	PANAMA CITY FL			TY-ST-ZIP					- -		-
TITLE	U	DELETE	5.1 TIT						L Chang	e Addition	
NAME			5.2 NA	ME							-
STREET ADDRESS 712 W 15TH ST			5.3 STREET ADDRESS								
CITY-ST-ZIP	PANAMA CITY FL		5.4 CI	TY-ST-ZIP							
TITLE		DELETE	6.1 TIT	LE					Chang	e Addition	7
NAME			6.2 NA	ME							1
STREET ADDRESS				REET ADDRESS							
CITY-ST-ZIP			0.4 CI	TY-ST-ZiP					_		

14. I 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 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 chapted, or on an attachment with a address.

SIGNATURE:

9-11-99 850-769-6454.