

FILE NOW: FILING FEE IS \$61.25

NONPROFIT
CORPORATION
ANNUAL REPORT
1999



FLORIDA DEPARTMENT OF STATE
Katherine Harris
Secretary of State
DIVISION OF CORPORATIONS

FILED
Apr 29, 1999 8:00 am
Secretary of State

04-29-1999 90258 016 ****61.25

DOCUMENT # N97000005573

1. Corporation Name

MAJA THE GIRL FROM THE NILE, COMPANY

Principal Place of Business

1500 S. SURF RD. #17
HOLLYWOOD FL 33019

Mailing Address

1500 S. SURF RD. #17
HOLLYWOOD FL 33019



2. Principal Place of Business

21

S
C
Maja, the Girl From the Nile
1500 S. Surf Rd. #17
Hollywood, FL 33019

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2a. Mailing Address

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S
C
Maja, the Girl From the Nile
1500 S. Surf Rd. #17
Hollywood, FL 33019

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3. Date Incorporated or Qualified

09/30/1997

4. FEI Number

65-0806953

Applied For

Not Applicable

5. Certificate of Status Desired

\$8.75 Additional
Fee Required

6. Election Campaign Financing

\$5.00 May Be
Added to Fees

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 617.0502 and 617.1508, 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 617.0503, Florida Statutes.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

April 26-99

12. OFFICERS AND DIRECTORS

TITLE D ☐ DELETE

NAME LANEY, LAURIE
STREET ADDRESS 1500 S. SURF RD. #17
CITY-ST-ZIP HOLLYWOOD FL 33019

TITLE D ☒ DELETE

NAME JANELLO, MARGARIDA
STREET ADDRESS 1500 S. SURF RD. #17
CITY-ST-ZIP HOLLYWOOD FL 33019

TITLE D ☐ DELETE

NAME GRUMBERG, KATIA
STREET ADDRESS 1500 S. SURF RD. #17
CITY-ST-ZIP HOLLYWOOD FL 33019

TITLE D ☐ DELETE

NAME YVETTE MALKI
STREET ADDRESS 1833 S. Ocean Dr - 1407
CITY-ST-ZIP HALANDALE 33009-FLORIDA

TITLE ☐ DELETE

NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ DELETE

NAME
STREET ADDRESS
CITY-ST-ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE ☐ Change ☐ Addition

1.2 NAME

1.3 STREET ADDRESS

1.4 CITY-ST-ZIP

2.1 TITLE ☐ Change ☐ Addition

2.2 NAME

2.3 STREET ADDRESS

2.4 CITY-ST-ZIP

3.1 TITLE ☐ Change ☐ Addition

3.2 NAME

3.3 STREET ADDRESS

3.4 CITY-ST-ZIP

4.1 TITLE ☒ Change ☐ Addition

4.2 NAME

4.3 STREET ADDRESS

4.4 CITY-ST-ZIP

5.1 TITLE ☐ Change ☐ Addition

5.2 NAME

5.3 STREET ADDRESS

5.4 CITY-ST-ZIP

6.1 TITLE ☐ Change ☐ Addition

6.2 NAME

6.3 STREET ADDRESS

6.4 CITY-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 617, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

SIGNATURE REQUIRED

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

April 26-99 (954) 9297155

CR2E037 (11/98)

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