05101999-90239-011-\$158.75-\$158.75

PROFIT CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State · · · · · · DIVISION OF CORPORATIONS

1. Corporation Name
Florida International Crucket Club, Inc

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FILED

Secretary of State

05-10-1999 90239 011 ***158.75

May 10, 1999 8:00 am

Principal Place of Business

600 CURLANDE Blod Mailing Address DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualifed 6-12-98 2. Principal Place of Business 21 6221 W. Atlantic Blud 2a. Mailipg Address 4. FEI Number Applied For 65-0860936 6221 W. Atlanta Blud Not Applicable Suite, Apt. #, etc. Suite, Apt. #, etc. \$8.75 Additional 5. Certificate of Status Desired 27 Fee Required City & State City & State \$5.00 May Be 6, Election Campaign Financing margate. mar gate 23 Trust-Fund Contribution~ 28 Added to Fees Country Zip 8. This corporation owes the current year Intangible 30 Personal Property Tax. III No 24 25 33*0*63 |29| 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent Name Denise (Unrshi The state of Street Address (P.O. Box Number is Not Acceptable) 82 83 City Zip Code 33063 Margate 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 dample with, and accept the obligations of. Section 607.0505, Florida Statutes. Denise (SIGNATURE (11/98)12. OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 13. TITLE DELETE Change 1 I TITLE Mahannad Qurashi **CR2E034** NAME 1.2 NAME 6221 W. Atlantic Blud STREET ADDRESS 1.3 STREET ADDRESS margate FL 33063 CITY-ST-ZIP 1,4 CITY-ST-ZIP Addition TITLE ☐ DELETE 21 TITLE Change _ZD Nasir Javed 5400 South St. Rd 7 NAME 2.2 NAME STREET ADDRESS 2.3 STREET ADDRESS FL CITY-ST-ZIP 2. 4 CITY-ST-ZIP ☐ DELETE Change ☐ Addition TITLE 31 TITLE Mohammed Jamshard Ahmed NAME 32 NAME 1608 NW 7m Ave. STREET ADDRESS 3.3 STREET ADDRESS 34. CITY-ST-ZIP CITY-ST-ZIP miani FL Addition TITLE ☐ DELETE Change 4 1 TITLE NAME 4 2 NAME STREET ADDRESS 4 3 STREET ADDRESS CITY-ST-ZIP 44 CITY-ST-ZIP DELETE Change Addition TITLE 51 TITLE NAME 52 NAME 5.3 STREET ADDRESS STREET ADDRESS 54 C/TY- ST- ZIP CITY-ST-ZIP DELETE SITITLE Change ☐ Addition 62 NAME NAME 6.3 STREET ADDRESS STREET ADDRESS 64 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 coperation or the receiver or frustee 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, with all other like empowered.

SIGNATURE:

Male amad Quresh

4-27-99 954-977-9728

Date Daytons Phone #

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