2004 FOR PROFIT CORPORATION

Sep 09, 2004 8:00 am Secretary of State ANNUAL REPORT DOCUMENT # P00000017013 09-09-2004 90014 014 ***150.00 1. Entity Name AMIRAN GIFT STATIONS, INC. Mailing Address Principal Place of Business 12445 BLUEBERRY ROAD CIRCLE EAST 12445 BLUEBERRY ROAD CIRCLE EAST JACKSONVILLE, FL 32258 JACKSONVILLE, FL 32258 04282004 No Cha-P CR2E034 (10/03) DO NOT WRITE IN THIS SPACE Applied For 4. FEI Number 59-3626570 Not Applicable \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent CURTIS, C. WILLIAM III, ESQ DO NOT WRITE 1930 SAN MARGO BLVD. 10151 DEERWOOD PARK BLUD. SUITE 202 BUILDING 200, SUITE 250 IN THIS SPACE JACKSONVILLE, FL 32207 32256 8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent. , (NOTE: Registered Agent signature required when reinstating) 9. Election Campaign Financing \$5.00 May Be FILE NOW!!! FEE IS \$150.00 Trust Fund Contribution. Added to Fees After May 1, 2004 Fee will be \$550.00 10. OFFICERS AND DIRECTORS TITLE PAKBAR, AKBAR NAME 12455 BLUEBERRY WOODS CIR E STREET ADDRESS JACKSONVILLE, FL 32258 CITY-ST-ZIP TITLE STREET ADDRESS CITY-ST-ZIP TITLE NAME DO NOT WRITE STREET ADDRESS CITY-ST-ZIP IN THIS SPACE TITLE NAME STREET ADDRESS CITY-ST-ZIP

12. 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 report or supplemental 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 10 or Block 11 if changed, or on an attachment with an address with all other like empowered.

SIGNATURE:

TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS

SIGNATURE AND TYPED OF PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4125/04

FILED

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LAW OFFICES OF
C. WILLIAM CURTIS, III, P.A.
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Tuesday, September 07, 2004

VIA FEDERAL EXPRESS

Department of State Division of Corporations 409 East Gains Street Tallahassee, Florida 32399

Re: Amiren Gift Stations; Document No. P00000017013

To Whom It May Concern:

Enclosed is an original 2004 Annual Report for the referenced corporation, and the owner's check for \$150.00 to cover annual fees.

My client has requested that I send you this letter requesting that you accept this amount in full payment of their annual fee. Prior to the May I deadline, they sent their annual report to my firm's prior address, as you can see from the enclosed postmarked envelope. Because I left private practice in 2002 to work for the City of Jacksonville, I left that address and informed all my clients about the change. This particular client apparently did not make a note of the change.

When I recently saw the client at his place of business, he informed me of this misunderstanding and asked that I send this letter. I recently returned to private practice and can be reached at the address or phone number set forth above.

Very truly yours,

C. William Curtis, III

Enclosures