

2004 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Feb 25, 2004 8:00 am
Secretary of State

02-25-2004 90010 001 ***150.00

DOCUMENT # P01000001658

1. Entity Name
DAWOOD GROUP, INC.



Principal Place of Business
**1819 S STATE ROAD 7
FT LAUDERDALE, FL 33317**

Mailing Address
**1819 S STATE ROAD 7
FT LAUDERDALE, FL 33317**

54010350



2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

01202004

Chg-P

CR2E034(10/03)

City & State

City & State

4. FEI Number

65-1063783

Applied For

Not Applicable

Zip

Country

Zip

Country

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

**DAWOOD, DAWOOD
1819 S STATE ROAD 7
FT LAUDERDALE, FL 33317**

7. Name and Address of New Registered Agent

Name **Fouad Dawood**

Street Address (P.O. Box Number is Not Acceptable)

1819 S State Rd 7

City **Ft. Lauderdale**

FL

Zip Code
33317

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.

SIGNATURE **Dawood Dawood**

Registered Agent

2-17-04

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

(NOTE: Registered Agent signature required when re-listing)

DATE

**FILE NOW!!! FEE IS \$150.00
After May 1, 2004 Fee will be \$550.00**

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

10. OFFICERS AND DIRECTORS

TITLE **P** ☐ Delete
NAME **DAWOOD, FOVAD**
STREET ADDRESS **1819 S STATE RD 7**
CITY-ST-ZIP **FT LAUDERDALE, FL 33317**

TITLE **DV** ☒ Delete
NAME **DAWOOD, DAWOOD**
STREET ADDRESS **1819 S STATE ROAD 7**
CITY-ST-ZIP **FT LAUDERDALE, FL 33317**

TITLE **DS** ☐ Delete
NAME **DAWOOD, FAHMI**
STREET ADDRESS **1819 S STATE ROAD 7**
CITY-ST-ZIP **FT LAUDERDALE, FL 33317**

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE **President** ☒ Change ☐ Addition
NAME **Fouad Dawood**
STREET ADDRESS **1819 S State Rd 7**
CITY-ST-ZIP **Ft. Lauderdale, FL 33317**

TITLE **Vice President** ☒ Change ☐ Addition
NAME **Fahmi Dawood**
STREET ADDRESS **1819 S State Rd 7**
CITY-ST-ZIP **Ft. Lauderdale, FL 33317**

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
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:

Fouad Dawood

Vice President 2-16-04

(954) 321-0622

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #