2004 FOR PROFIT CORPORATION ANNUAL REPORT

FILED May 19, 2004 8:00 am Secretary of State 04-28-2004 90308 041 ***150.00

DOCUMENT # P03000113520 1. Enlity Name BASHAN ENTERPRISES, INC.						04-28-20	04 90308 04	11 **	*150.00
Principal Place of Business Mailing Address 200 SE 6TH STREET 200 SE 6TH STREET FT. LAUDERDALE, FL 33301 FT. LAUDERDALE, FL 333			3301			422836 1111 1111 1111 1111 1111	0101 (1011 1931 1988 <u>)</u>	1 8 71 83 171	Mill 1 11 11
2. Principal Pla	ace of Business	3. Mailing Address							
Suite, Apt. #, etc.		Suite, Apt. #, etc.			01122004	Chg-P	CR2E034 (10	/03)	
City & State		City & State			4. FEI Number	-240471	4		Applicable
Zip	Country	Zip	Coun	lry	5. Certificate of	of Status Desired	□ \$8.75 Fee Re		
6. Name and Address of Current Registered Agent				Name	7. Name and	Address of New Re	gistered Agent		
WEISBERG, LAWRENCE MESQ. ————————————————————————————————————				Street Address	(P.O. Box Numbe	r is Not Acceptable)	<u> </u>		
				City			FL Zi	Code	
the obligati	named entity submits this statement to one of registered agent.	or the purpose of changing its	register	I ed office or registe	red agent, or boti	n, in the State of Flor		with, a	and accept
SIGNATURE	Signature, typed or printed name of registered agen	r and site if applicable. (NOT	E: Registere	d Agent signature require	d when reinstating)		DATE	-	
FILI After Ma	E NOW!!! FEE IS \$150.00 ay 1, 2004 Fee will be \$550.	9. Election Campa Trust Fund Cont		ncing \$5	.00 May Be ded to Fees				
10.	OFFICERS AND	·	11.		ADDITIONS/	CHANGES TO OFFIC			
NAME STREET ADDRESS -CITY-ST-ZIP	BISHARI; AMNON 200 SE 6TH STREET FT. LAUDERDALE, FL 33301	☐ Delete						su ge	Addition
NAME STREET ADDRESS CITY-ST-ZIP	D BISHARI, AVIVA 200 SE 6TH STREET FT. LAUDERDALE, FL 33301	☐ Deleta		_			□ α	nange	Addition
TITLE NAME "STREET ADDRESS CITY-ST-ZIP	D BISHARI, ASAF 200 SE 6TH STREET FT. LAUDERDALE, FL. 33301	E KE EET ADDRESS (-ST-ZIP	·····		C	nange	Addition		
TITLE NAME STREET ADORESS CITY-ST-ZIP		☐ Delicite		1				hange	Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		Deteta				,	_ c	hange	Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	·	☐ Delete					c	hange	☐ Addition
!ndicated	certify that the information supplied will on this report or supplemental report promotion or the receiver or trustee em, or on an attachment with an address	is true and accurate and that	my sign: t as requ s.	ature shall have the ired by Chapter 60	same legal effec	t as if made under o s; and that my name	ath: that I am an	officer k 10 or	or director