

SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER SEPTEMBER 17, 1997.
AMOUNT DUE ON OR BEFORE 9/17/97: \$550 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$750.)

1062

PROFIT
CORPORATION
ANNUAL REPORT
1997



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

FILED

97 SEP -4 AM 11:24

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # P08307

(1)

1. Corporation Name
PHOENICIAN IMPORTS, INC.



DO NOT WRITE IN THIS SPACE

Principal Place of Business
**2200 SO 10 STR. SPC F4
MCALLEN TX 78503
US**

Mailing Address
**PO BOX 2147
MCALLEN TX 78505
US**

3. Date Incorporated or Qualified 12/06/1985	3a. Date of Last Report 07/23/1996
4. FEI Number 75-1735567	Applied For ☐ Not Applicable
5. Certificate of Status Desired ☐	\$8.75 Additional Fee Required
6. Election Campaign Financing Trust Fund Contribution ☐	\$5.00 May Be Added to Fees
8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. ☐ Yes ☐ No	

2. Principal Place of Business 21	2a. Mailing Address 26
Suite, Apt. #, etc. 22	Suite, Apt. #, etc. 27
City & State 23	City & State 28
Zip 24	Country 25
Zip 29	Country 30

9. Name and Address of Current Registered Agent

**SAID, AZHAR
7241 DADELAND MALL
ROOM 3100
MIAMI FL 33156**

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 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 familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE _____ (NOTE: Registered Agent signature required when reinstating) DATE _____

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	DPT	1.1 TITLE	☐ Change ☐ Addition
NAME	SAID, AZHAR	1.2 NAME	
STREET ADDRESS	301 HOUSTON	1.3 STREET ADDRESS	
CITY-ST-ZIP	MCALLEN TX	1.4 CITY-ST-ZIP	
TITLE	DVS	2.1 TITLE	☐ Change ☐ Addition
NAME	SAID, ASIF	2.2 NAME	
STREET ADDRESS	301 HOUSTON	2.3 STREET ADDRESS	
CITY-ST-ZIP	MCALLEN TX	2.4 CITY-ST-ZIP	
TITLE		3.1 TITLE	☐ Change ☐ Addition
NAME		3.2 NAME	
STREET ADDRESS		3.3 STREET ADDRESS	
CITY-ST-ZIP		3.4 CITY-ST-ZIP	
TITLE		4.1 TITLE	☐ Change ☐ Addition
NAME		4.2 NAME	
STREET ADDRESS		4.3 STREET ADDRESS	
CITY-ST-ZIP		4.4 CITY-ST-ZIP	
TITLE		5.1 TITLE	☐ Change ☐ Addition
NAME		5.2 NAME	
STREET ADDRESS		5.3 STREET ADDRESS	
CITY-ST-ZIP		5.4 CITY-ST-ZIP	
TITLE		6.1 TITLE	☐ Change ☐ Addition
NAME		6.2 NAME	
STREET ADDRESS		6.3 STREET ADDRESS	
CITY-ST-ZIP		6.4 CITY-ST-ZIP	

14. I do 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 607, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE

[Signature]

SAID

3/19/1997

CR2E034 (4/97)

2062

phoenician imports, inc.

P.O. Box 2147
McAllen, TX 78505-2147

August 26, 1997

Florida Department of State
P.O. Box 6327
Tallahassee, Florida 32314

Dear Gentleperson:

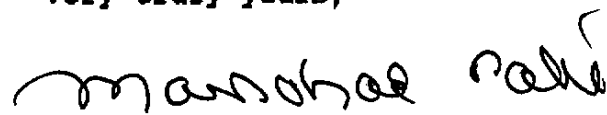
I have received a 2nd notice for filing of the 1997 Profit Corporation Annual Report for Phoenician Imports, Inc.; however, that report was filed March 11, 1997.

I have called and talked to your office and they indicated to me that this form and the check were returned in March, 1997 due to the officer not signing on line 14 of that form. We have never received the letter informing us that the officer did not sign and therefore I respectfully request that you waive the late filing penalty.

In connection therewith, I am returning the signed form along with a reissued check for \$165.

Should you need any additional information, please do not hesitate to call.

Very truly yours,


Manohar Patel