

FILE NOW: FILING FEE AFTER MAY 1 IS \$25.00

PROFIT CORPORATION ANNUAL REPORT 1996



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

DOCUMENT # P92000005588 (8)

1. Corporation Name
NALI, INC.



Principal Place of Business: **720-730 N.W. 103 STREET MIAMI FL 33150**
Mailing Address: **5937 S FARRAGUT DRIVE HOLLYWOOD FL 33021**

3. Date Incorporated or Qualified 11/16/1992	3a. Date of Last Report 04/19/1995
4. FEI Number 65-0383706	Applied For <input type="checkbox"/> Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required
6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/>	\$5.00 May Be Added to Fees
8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	

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

9. Name and Address of Current Registered Agent

**NAZIM, BIBI R
5937 S FARRAGUT DRIVE
HOLLYWOOD FL 33021**

10. Name and Address of New Registered Agent

B1. Name
B2. Street Address (P.O. Box Number is Not Acceptable)
B3.
B4. City **FL** B5. 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 officer 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 _____ (Date) _____

12. OFFICERS AND DIRECTORS		13.
TITLE	DPS <input type="checkbox"/> DELETE	1.1 TITLE
NAME	NAZIM, MOHAMED	1.2 NAME
STREET ADDRESS	270 NW 73RD ST.	1.3 STREET ADDRESS
CITY-ST-ZIP	MIAMI FL 33138	1.4 CITY-ST-ZIP
TITLE	DT <input type="checkbox"/> DELETE	2.1 TITLE
NAME	NAZIM, BIBI R	2.2 NAME
STREET ADDRESS	5937 S FARRAGUT DRIVE	2.3 STREET ADDRESS
CITY-ST-ZIP	HOLLYWOOD FL 33021	2.4 CITY-ST-ZIP
TITLE	<input type="checkbox"/> DELETE	3.1 TITLE
NAME		3.2 NAME
STREET ADDRESS		3.3 STREET ADDRESS
CITY-ST-ZIP		3.4 CITY-ST-ZIP
TITLE	<input type="checkbox"/> DELETE	4.1 TITLE
NAME		4.2 NAME
STREET ADDRESS		4.3 STREET ADDRESS
CITY-ST-ZIP		4.4 CITY-ST-ZIP
TITLE	<input type="checkbox"/> DELETE	5.1 TITLE
NAME		5.2 NAME
STREET ADDRESS		5.3 STREET ADDRESS
CITY-ST-ZIP		5.4 CITY-ST-ZIP
TITLE	<input type="checkbox"/> DELETE	6.1 TITLE
NAME		6.2 NAME
STREET ADDRESS		6.3 STREET ADDRESS
CITY-ST-ZIP		6.4 CITY-ST-ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
<input type="checkbox"/> Change <input type="checkbox"/> Addition	
<input type="checkbox"/> Change <input type="checkbox"/> Addition	
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14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), 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:  **NAZIM, MOHAMED**
 Date: **04/20/96** (305) 736-5000
 State: **FL** City: **Hollywood**

CR2E034 (12/95)