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PROFIT CORPORATION **ANNUAL REPORT**



FLORIDA DEPARTMENT OF STATE Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

1996

Principa! Place of Business Mailing Add 1940 U.S. HWY 19. N. 1940 U.S. HOLIDAY FL 34691 HOLIDAY			N .	<u> </u>				
					 Date Incorporated or Qualified 01/01/1993 		e of Last 2/28/1	•
	ce of Business	2a. Mailing Address			4. FEI Number		2/20/1	Applied For
Suite, Apt. #	- oto	26			59-3164097	··		Not Applicat
30ite, Api. #	, etc.	Suite, Apt. #, etc.			5. Certificate of Status Desired	П		75 Additional
City & State		City & State			6. Election Campaign Financing			e Required
]		28			Trust Fund Contribution			00 May Be
Zip 1	Country	Zip	Country		8. This corporation has liability to	or intangible to		
	9. Name and Address of Cui	29	30		Florida Statutes X Ye	es 🗌 No		
	9. Name and Address of Cui	rrent Hagistered Agent	81 Na	me	10. Name and Address of New	Registered	Agent	
JADOUN.	, GHASSAN							
	. HWY 19, N.		82 Sti	eet Addre	ess (P.O. Box Number is Not Accepta	able)		
	FL 34691		83					······································
			84 Cit				T. T.	
			84 Oit	•		FL		Zip Code
familiar with GNATURF	n, and accept the obligations of, S	Section 607.0505, Florida Statute		d corpora n's board	ation submits this statement for the p d of directors. I hereby accept the ap		anging its registere	registered off ed agent. I am
familiar with	n, and accept the obligations of, S synature, typed or printed name of registered a OFFICERS.	ection 607,0505, Florida Statute gent and title if applicable. IR AND DIRECTORS	IOTE: Registered Agent signal	ir s ocart	o or directors. I hereby accept the ap	urpose of cha pointment as DATE FICERS AND	registere	ORS IN 12
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SIGNATURE: SIGNATURE AND TYPED OR PAINED NAME

GHASSAN JADOUN: 4-13-96
DEFICER OR DIRECTOR
Description Process
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