## FILE NOW: FILING FEE AFTER MAY 1 IS \$550.00

**PROFIT CORPORATION ANNUAL REPORT** 

1997



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

## DOCUMENT # P9300001605 (3)

ASKAR ENTERPRISES, INC.

Principal Place of Business

Mailing Address

436 N. FEDERAL HIGHWAY

438 N. FFDERAL HIGHWAY

## **FILED** Apr 30 1997 8:00am Secretary of State



BOYNTON BE		BOYNTON BEAC	H FL 33435-4121			
					3. Date Incorporated or Qualified 01/04/1993	3a. Date of Last Report 08/23/1996
2. Principal Place of Business		2a. Mailing Add	2a. Mailing Address		4. FEI Number	Applied For
21		26			65-0374986	Not Applicable
Sulte, Apt. #, etc.		Suite, Apt. #	Suite, Apt. #, etc.		5. Certificate of Status Desired	\$8.75 Additional
22		27			S. Commode of Clares Beside	Fee Required
City & State		City & State	·		6. Election Campaign Financing	\$5.00 May Be
23		28			Trust Fund Contribution Added to Fees	
Zip	Country	Zip	_1 <u> </u>		8. This corporation has liability for intangible tax under s. 199.032,	
24	25 29 9, Name and Address of Current Registered Agent			0 Florida Statutes Yes No  10 Name and Address of New Registered Agent		
ACL		Tont nogistered Agent		81 Name	10, Hame and Address of New Re	Bistalen Yösur
ASKAR, KHAIR 641 N.E. 6TH AVE.				of Name		
			82 Street Ac		ddress (P.O. Box Number is Not Acceptable)	
80	YNTON BEACH FL 33435			83		
				**		
				<b>84</b> City		FL 85 Zip Code
44 Pursuant	to the provisions of Sections 607.0	1502 and 607 1508/	da Statulae the a	hove named cor	poration pulpoits this statement for the s	
office or	registered eyent, o both, in the St	ate of Florida Such Thai	ige was authorize	d by the corpora	poration submits this statement for the pation's board of directors. I hereby acceptions	of the appointment as registered
	am familiar with and accept the ob	oligations of Section 1910	0505, Horida Sta	lules.		
SIGNATURE	Signature typed or printed name of registered		(NOTA : Pagestern	d Agent signature requ	ind when constition?	DATE
12.	OFFICERS A	AND DIRECTORS	13.	o vacan signature rado	ADDITIONS/CHANGES TO OFFIC	
TITLE	I P		ELÉTE 1,1 TI	ITLE	ADDITIONS/OFFANGES TO OFFIC	Change Addition
NAME	ASKAR, KHAIR		12 N			
STREET ADDRESS	641 NE 6TH AVE.			TREET ADDRESS		
CITY-ST-ZIP	<b>BOYNTON BEACH FL 3343</b>	5		ITY-ST-ZIP		
TITLE			ELETE 21TH			Change Addition
NAME		<u>.                                    </u>	22 N	ľ		
STREET ADDRESS				TREET ADDRESS		
CITY-ST-ZIP				SITY-ST-ZIP		
TITLE		[ T D	ELETE 311	·		Change Addition
NAME			32 N			
STREET ADDRESS			1	TREET ADDRESS		
CITY-ST-ZIP				31Y - S1 - ZIP		
TITLE		□ D			<del></del>	Charige Addition
NAME	:		4.2 h			•
STREET ADDRESS			4.3 S	TREET ADDRESS		
CITY-ST-ZIP				ITY-SI-ZIP		
TITLE						☐ Change ☐ Addition
NAME			5.2 N	AME		
STREET ADDRESS				TREET ADDRESS		
CITY-ST-ZIP			1	ITY - \$1 - ZIP		
TITLE		0				☐ Change ☐ Addition
NAME			6.2 N	4		
STREET ADDRESS				IREE1 ADDRESS		
CITY-ST-ZIP				ITY - ST - 7IP		
O111-01-E11	•		■ U.4 GI	iri ar zir I		

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 controllation 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 atlas imentioning address.