

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.)

PROFIT  
CORPORATION  
ANNUAL REPORT  
**1997**



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

APPROVED  
AND  
FILED

1997 JUL 21 PM 3:41

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

DOCUMENT # **P93000002838 (9)**

1. Corporation Name  
**SHIRAZI, INC.**

Principal Place of Business

Mailing Address

**7135 COLLINS AVE  
SUITE 1136  
MIAMI BEACH FL 33141  
US**

**7135 COLLINS AVENUE  
SUITE 1136  
MIAMI BEACH FL 33141**

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

**01/13/1993**

3a. Date of Last Report

**01/30/1996**

4. FEI Number

**65-0555132**

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 MIAMI BEACH**

2a. Mailing Address

**26 SAME AS ABOVE**

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

24

25

29

30

9. Name and Address of Current Registered Agent

**SHIRAZI, RAHAMIM  
420 LINCOLN ROAD  
SUITE 440  
MIAMI BEACH FL 33139**

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 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

Signature, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reissuing)

DATE

12. OFFICERS AND DIRECTORS

TITLE **P** ☐ DELETE  
NAME **SHIRAZI, RAHAMIM**  
STREET ADDRESS **7135 COLLINS AVENUE #1136**  
CITY-ST-ZIP **MIAMI BEACH FL 33141**

TITLE ☐ DELETE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ DELETE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ DELETE  
NAME  
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CITY-ST-ZIP

TITLE ☐ DELETE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ DELETE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE ☐ Change ☐ Addition  
1.2 NAME **Address-Change only**  
1.3 STREET ADDRESS **Same AS #12-CY #9-**  
1.4 CITY-ST-ZIP

2.1 TITLE ☐ Change ☐ Addition  
2.2 NAME  
2.3 STREET ADDRESS  
2.4 CITY-ST-ZIP

3.1 TITLE ☐ Change ☐ Addition  
3.2 NAME **400002250344--1**  
3.3 STREET ADDRESS **-07/29/97--01046--005**  
3.4 CITY-ST-ZIP **\*\*\*\*\*165.00 \*\*\*\*\*165.00**

4.1 TITLE ☐ Change ☐ Addition  
4.2 NAME **400002250344--1**  
4.3 STREET ADDRESS **-07/29/97--01046--006**  
4.4 CITY-ST-ZIP **\*\*\*\*\*5.00 \*\*\*\*\*5.00**

5.1 TITLE ☐ Change ☐ Addition  
5.2 NAME  
5.3 STREET ADDRESS  
5.4 CITY-ST-ZIP

6.1 TITLE ☐ Change ☐ Addition  
6.2 NAME  
6.3 STREET ADDRESS  
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.

CP2E034 (4/97)

**SCC 7-21-97**

**305**

July 16 1997

Division of Corporations  
Annual Reports Section  
P.O. Box 1500  
Tallahassee, Florida 32302-1500

RE: Document Number:# P93000002838 ( 9 )

TO WHOM IT MAY CONCERN:

Per my conversation with Susanne Hacks in the office I advised her that I sent my corporation renewal papers on 1/2/97. The check number was # 785. With in the last couple of days I received a second notice. Miss Hacks advised me to send a check for \$ 165.00 and the second notice. I am therefore complying with this request. I hope that there will be no penalties to my corp. renewal report. If there is anything that I can assist you with please feel free to contact me at 866-8360.

Thank you for your attention and cooperation in this very important matter.

Respectfully submitted,

  
Rahamim Shirazi, Pres.  
Shirazi, Inc.

ENCLS: 2nd Notice Document  
Copy of 1st. Notice