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FILED
Jul 08 1998 8:00am
Secretary of State

PROFIT CORPORATION ANNUAL REPORT 1998		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # *P 93000015130*

1. Corporation Name
Florida Construction and Trading Corp.

Principal Place of Business: *6680 Powers Av. Jax, FL 32217*
Mailing Address: *6680 Powers Av. Jax, FL 32217*

2. Principal Place of Business 21 <i>6680 Powers Av.</i> Suite, Apt. #, etc 22 City & State 23 <i>Jax, FL 32217</i> Zip 24 <i>32217</i> Country 25 <i>U.S.A.</i>	2a. Mailing Address 26 <i>SAME</i> Suite, Apt. #, etc 27 City & State 28 <i>Jax, FL</i> Zip 29 <i>32217</i> Country 30 <i>U.S.A.</i>
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9. Name and Address of Current Registered Agent
6680 Powers Av. Jax, FL 32217
Att. SAM YAZJI

10. Name and Address of New Registered Agent
81 Name *SAM YAZJI*
82 Street Address (P.O. Box Number is Not Acceptable)
6680 Powers Av.
83
84 City *Jax, FL.* FL 85 Zip Code *32217*

11. Pursuant to the provisions of Sections 607.0502 and 607.1504, 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]*

12. OFFICERS AND DIRECTORS	
TITLE	<i>P. YAZJI HAYSSAM</i> ☐ DELETE
NAME	<i>7247 Placid Oaks Dr</i>
STREET ADDRESS	<i>Jax, FL 32217</i>
CITY-ST-ZIP	
TITLE	<i>U. EL-Yazigi</i> ☐ DELETE
NAME	<i>18555 Mission Hills Cr. N.</i>
STREET ADDRESS	<i>Jax, FL 32225</i>
CITY-ST-ZIP	
TITLE	<i>V. YAZEGI, Marwan</i> ☐ DELETE
NAME	<i>6407 LENCZYK Dr</i>
STREET ADDRESS	<i>Jax, FL 32277</i>
CITY-ST-ZIP	
TITLE	<i>T. ALYAZGI Ghassan</i> ☐ DELETE
NAME	<i>7230 Placid Oaks Dr</i>
STREET ADDRESS	<i>Jax, FL 32277</i>
CITY-ST-ZIP	
TITLE	<i>S. YAZJI Kamal</i> ☐ DELETE
NAME	<i>8072 International Village Dr</i>
STREET ADDRESS	<i>Jax, FL 32277</i>
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
11 TITLE	☐ Change ☐ Addition
12 NAME	
13 STREET ADDRESS	
14 CITY-ST-ZIP	
21 TITLE	☐ Change ☐ Addition
22 NAME	
23 STREET ADDRESS	
24 CITY-ST-ZIP	
31 TITLE	☐ Change ☐ Addition
32 NAME	
33 STREET ADDRESS	
34 CITY-ST-ZIP	
41 TITLE	☐ Change ☐ Addition
42 NAME	
43 STREET ADDRESS	
44 CITY-ST-ZIP	
51 TITLE	☐ Change ☐ Addition
52 NAME	
53 STREET ADDRESS	
54 CITY-ST-ZIP	
61 TITLE	
62 NAME	
63 STREET ADDRESS	
64 CITY-ST-ZIP	

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***150.00

14. I 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 attached sheet with an address.

SIGNATURE: *[Signature]*
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

6-10-98 904-443-2766

CR2E034 (10/97)