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PROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT #

P93000049427 (6)

al-Jumaa II, inc.

FILED May 12 1998 8:00am Secretary of State



Principal Place of Business Mailing Address P.O. BOX 2011 HOLLYWOOD FL 33022 P.O. BOX 2011 HOLLYWOOD FL 33022 DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified 07/15/1993 2. Principal Place of Business 2a. Mailing Address 4. FEI Number Applied For 65-0430247 21 Not Applicable Suite, Apt. #, etc. Suite Apt # etc \$8.75 Additional 5. Certificate of Status Desired 22 Fee Required City & State City & State 6. Election Campaign Financing \$5.00 May Be 23 28 Trust Fund Contribution Added to Fees Zip Country Country 8. This corporation owes or has paid the current year Intangible 24 25 29 Personal Property Tax due June 30. Yes 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent 61 Name SUKKAR, MAZEN M. P 2432 HOLLYWOOD BLVD. Street Address (P.O. Box Number is Not Acceptable) HOLLYWOOD FL 33020 83 City Zip Code 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 (NOTE Registered Agent signature required when reinstating) 12. OFFICERS AND DIRECTORS 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 TITLE DELETE Change Addition SUKKAR, MAZEN M. 1.2 NAME 2432 HOLLYWOOD BLVD. STREET ADDRESS 1.3 STREET ADDRESS HOLLYWOOD FL 33020 CITY-ST-ZIP 1.4 City-ST-ZIP TITLE DELETE President 2.1 TITLE Change X Addition NAME 2.2 NAME Tarek Al Fassi STREET ADDRESS 2.3 STREET ADDRESS 5111 Pinetree Drive CITY-ST-ZIP Miami Beach, Fl 33140 2 4 CITY-ST-ZIP DELETE Change TITLE 3.1 TITLE NAME 3.2 NAME STREET ADORESS 3.3 STREET ADDRESS CITY-ST-ZIP 3.4. CITY-ST-ZIP DELETE TITLE 4.1 TITLE ☐ Change ■ Addition NAME 4. 2 NAME STREET ADDRESS 4 3 STREET ADDRESS CITY - ST - ZIP 4.4 CITY-ST-ZIP DELETE TITLE 5.1 TITLE Change Addition NAME 5.2 NAME STREET ADDRESS **5 3 STREET ADDRESS** CITY - ST - ZIP 5.4 CITY - ST - ZIP TITLE DELETE 6.1 TITLE Change Addition NAME 6.2 NAME STREET ADDRESS CITY-ST-ZIP

14. Thereby certify that the information supplied with this filing does not qualify indicated on this annual report or supplemental annual report is the And a officer or director of the corporation of the indicated on this annual report is the And a officer or director of the corporation of the indicated on the indicated of the for the exemption stated in Section 119.07(3)(i). Florida Statutes. I further certify that the information curate and that my signature shall have the same legal effect as if made under oath; that I am an execute this report as required by Chapter 607, Florida Statutes; and that my name appears in

SIGNATURE: