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

**PROFIT** CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

## Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

1997 DOCUMENT #

Principal Place of Business

P93000050053 (6)

Mailing Address

COOPER CREDIT AND COMMERCE INTERNATIONAL, INC.

%11330 S.W. 115TH TERRACE MIAMI FL 33176		%11330 S.W. 115TH TERRACE MIAMI FL 33176								
						3. Date Incorporated or Qualified 07/12/1993		te of Last		
	lace of Business	2e, Mailing Address				4. FEt Number			Applied For	
21		26			···	65-0456249			Not Applicable	
Suite, Apt. #, etc.		Suite, Apt. #, etc.	27			5. Certificate of Status Desired		\$8.75 Additional Fee Required		
City & State		City & State				Election Campaign Financing     Trust Fund Contribution			May Be	
Zip <b>24</b>	Country 25	25 29 30				8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes				
	9. Name and Address of Curre	ent Registered Agent				10. Name and Address of New Rec	jistered A	gent		
MO	GHADDAM, ANVAR B			81	Name					
11330 S.W. 115 TERRACE MIAMI FL 33176				82	Street A	ddress (P.O. Box Number is Not Acceptable)				
MIA	MI FL 331/0			83	<del></del>				<del> </del>	
				84	City		FL	<b>85</b> Zij	o Code	
11. Pursuant office or r	to the provisions of Sections 607.0t egistered agent, or both, in the Sta m familiar with, and accept the obli	002 and 607 1508, Florida Stati to of Florida. Such change was	utes, the a	bove d by	e-named o	orporation submits this statement for the progration's board of directors. I hereby accep		changing cintment a	its registered is registered	
SIGNATURE							***************************************			
12.	Signative typed or printed name of registering a CEFT CERS A	DO DIRECTORS (NC	III: Hegistere	d Age	nt signature n	quired when reinstating) ADDITIONS/CHANGES TO OFFIC	DATE EDC AND	DIDECTO	OC IN 40	
TOTALE	D	DELETE	1.1 1	ITLE	<del></del>	SENIOR VP		Change		
NAME	MOGHADDAM, ANVAR	· · · · · · · · · · · · · · · · · · ·		1.2 NAME B				LL Ontinge	Notation	
STREET ADDRESS	ALOGO ON ALE TERRADE					BENNAM BASHIRI 11330 SW 115TH TERRACI	_			
C:TY - ST - ZIP	MIAMI FL 33176			(TY-S			Ε			
TITLE	VP	DELETE	217		1-21/	MIAMI, FL 33176		Change	Addition	
NAME	ROSA LINA COBIAN		22N	AME						
STREET ADDRESS	3510 BISCAYNE BLVD	510 BISCAYNE BLVD 23		2.3 STREET ADDRESS						
DITY - ST - ZIP	MIAMI FL 33137	IIAMI FL 33137 2 4		2 4 CITY-ST-ZIP						
TITLE	V/P	DELETE	311	······				Change	Addition	
NAME	MOHSEN KHATIBI		32 N	AME						
STREET ADDRESS	1050 95 ST #8		335	IREET	ADDRESS					
CiTY+S1+ZIP	BAY HARBOR FL 33154		34 (	DIY-S	rt-ziP					
TITLE	V/P	☐ DELETE	4.1 TI	ITLE		***************************************		Change	Addition	
NAME	KUROSH B. MOGHADDAM		4 2 1	NAME						
STREET ADDRESS	11330 SW 115 TERR		438	TREET	ADDRESS					
CITY - ST - ZIP	MIAMI FL 33176		44 C	IIY-S	T-ZIP					
TITLE	VP .	☐ DELETE	5 1 TI	17LE				Change	Addition	
NAME	Moghaddam, Kambiz B.		52 N	AME.						
STREET ADDRESS	11330 SW 115 TERRACE		535	TREET	ADDRESS					
CITY - S1 - ZIP	MIAMI FL		54 C	HY-S	r-ZIP					
ĦILĘ	VP .	DELETE	61 TI	TLE				Change	Addition	
NAME	TRAPAGA, MAGGIE		62 N	AME	1					
STREET ADDRESS	3510 RISCAYNE RIVD		620	токст	ADDRECC					

**SIGNATURE:** 

CITY - S1 - ZIP

MIAMI FL

Lam an officer or director of thappears in Block 12 or Block

14. I do hereby certify that the information supplied with this filing does not qualify for the information indicated on this annual report or supplemental annual report is true and I am an officer or director of the corporation or the receiver or trustee empowered to

stated in Section 119.07(3)(i), Florida Statutes. I further certify that the

at my signature shall have the same legal effect as if made under oath; that bort as required by Chapter 607, Florida Statutes, and that my name

**FILED** 

Jan 21 1997 8:00am

Secretary of State