FILE NOW: FILING FEE AFTER MAY 151

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PROFIT CORPORATION ANNUAL REPORT 1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT #

P93000060878 (4)

DEERBORN, INC.

FILED Jan 22 1998 8:00am Secretary of State



Principal Place of Business Mailing Address					1944 KB346 B5965 ADODA IM144 1888) 1891 (ADD	
	TREET NORTH URG FL 33701	1266 34TH STREET NORTH ST PETERSBURG FL 33701		DO NOT WRITE IN THIS SPACE		
					3. Date Incorporated or Qualified	
					08/26/1993	
—	Place of Business	2a. Mailing Address			4, FEI Number	Applied For
Suite, Apt. #, etc.		26 Cuito Ant # oto	Suite, Apt. #, etc.		59-3225029	Not Applicable
22 Suite, Apr.	#, etc.				5. Certificate of Status Desired	\$8.75 Additional Fee Regulred
City & Stat	le	City & State		6. Election Campaign Financing	\$5.00 May Be	
23		28	28		Trust Fund Contribution	Added to Fees
Zip	Country	Zip	Cour	try	8. This corporation owes or has pa	aid the current year Intangible
24	25	29	30		Personal Property Tax due June	
	9. Name and Address of Currer	nt Registered Agent		81 Name	10. Name and Address of New Re	gistered Agent
ZACUR, RICHARD A 5200 CENTRAL AVENUE				81 NameSCHWANKE TW 82 Street Address (P.O. Box Number is Not Acceptable)		
				15312	- CAPROLLTON	LN
			[1	City	AMPA	85 Zip Code
11, Pursuant	to the provisions of Sections 607.050	02 and 607,1508, Florida Stati	utes, the ab	ove-named cor	poration submits this statement for the p	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, Soction 607.0505, Florida Statutes.						
SIGNATURE	Sim w Selm					17 197
SIGNATURE	Signature, typed or printed minic of registerad ag-	unt and title if applicable (NC	DTE: Registered	Agont signature requ	red when reinstating)	DATE
12.		ID DIRECTORS	13.		ADDITIONS/CHANGES TO OFFICE	
TITLE	D	☐ DELETE	1.1 THU	E		L Change L Addition
NAME	CHARARA, RADWAN		1.2 NAN			
STREET ADDRESS	1266 34TH STREET NORTH			FET ADDRESS		
CITY-ST-ZIP TITLE	ST PETERSBURG FL 33713	DELETE	2.1 Titl	'-ST-ZIP		Change Addition
NAME	CHARARA, HASSAN	- Otter	2.1 IIII 2.2 NAA	i		
STREET ADDRESS	1266 34TH STREET NORTH			EET ADDRESS		
CITY-\$1-ZIP	ST PETERSBURG FL 33713			Y-ST-ZIP		
TITLE	01 121211050110 12 001 15	DELETE	317171			Change Addition
NAME	, ,		3.2 NAN	- 1		_ , _
STREET ADDRESS	,		3.3 STR	EET ADDRESS		
CITY-ST-ZIP			3.4. CIT	Y-ST-ZIP		
TITLE		DELETE	4.1 TITL	E		Change Addition
NAME .			4. 2 NAI	AE .		
STREET ADDRESS			4,3 \$TR	EE1 ADDRESS		
City-St-Zip				- ST-ZIP		
TITLE		L DELETE	5.1 1110	ì		☐ Change ☐ Addition
NAME			5.2 NAM			
STREET ADDRESS				ET ADDRESS		
CITY+\$T-ZIP TITLE		☐ DELETE	5.4 CITY 6.1 TITL	- \$1 - ZIP		Change Addition
NAME		E DEFETE	6.1 IIIL			EL Anguille El voyuroli
STREET ADDRESS				EET ADDRESS		
CITY-ST-ZIP			1			
14 I hereby o	L certify that the information supplied w	ith this filing does not qualify	for the even	-st-ZIP nption stated in	Section 119.07(3)(i), Florida Statutes. I	further certify that the information
indicated	on this annual report or supplements	al annual report is true and ac	curate and	that my signatu	ure shall have the same legal effect as it ulred by Chapter 607, Florida Statutes;	made under oath; that I am an
Block 12	or Block 13 if changed, or on in ala	chainent with an address.	, avecare in	e report as req	Giros by Griapter 607, Florida Statutes,	ана пастну наше арреату п

SIGNATURE:

HASSON LABORACA

(815) 323-4552