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PROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

FILED Apr 08 1997 8:00am Secretary of State

DOCUMENT # P9400006259 (3) JADOON & COMPANY, INC.

| Princ-pal Place of Business Mailing Address | | | | | | | OBSK OBKO OM | | | |
|---|---|---|---|--------|---|---|-----------------------------|-----------------------|----------------------------|--|
| 1250 S.W. 27TH FT. LAUDERDA | | 1250 S.W. 27TH AVE. FT. LAUDERDALE FL 3331 | 50 S.W. 27TH AVE. . LAUDERDALE FL 33312-2940 | | | | | | | |
| | | | | | | 3. Date incorporated or Qualified 01/26/1994 | 3a. Date 03/05 | | eport | |
| 2. Princ pal Pl 21 | ace of Business | 2a. Mailing Address 26 | | | | 4. FEI Number 65-0462410 | Applied For Not Applicable | | | |
| Suite Apt | # etc: | Suite, Apt. #, etc. | | | | 5. Certificate of Status Desired \$8.75 Additional Fee Regulred | | | | |
| City & State |) | City & State | h | | | 8. Election Campaign Financing \$5.00 May Be Trust Fund Contribution Added to Fees | | | | |
| Zıp 24 | Country 25 | Zip 29 | 30 Cou | ıntry | | 8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes | | | | |
| 9. Name and Address of Current Registered Agent | | | 1301 | T | | 10. Name and Address of New Registered Agent | | | | |
| JADI | DON, MOHAMMAD S | | •• | 81 | Name | | | | | |
| 1250 |) S.W. 27TH AVE. LAUDERDALE FL 33312 | | 82 Street A | | Street Addr | dress (P.O. Box Number is Not Acceptable) | | | | |
| • • • • | CAUDINOTIC VE GOOTE | | | 83 | | | | | | |
| | | | | 84 | City | | FL | 35 Zip (| Code | |
| office or re agent 1 a | io the provisions of Sections 607.050; egistered agent, or both, in the State ni familiar with, and accept the obliga | of Florida. Such change was | authorize | d by | the corporat | oration submits this statement for the points board of directors. I hereby accep | rpose of ch t the appoin | anging it tment as | s registered registered | |
| SIGNATURE | Signature: typed or printed name of registered age: | nt and title it applicable (NOT | E Registere | d Age | nt signature require | ed when reinstating) | DATE | | | |
| 12. | OFFICERS AND | 13. | | | ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 | | | | | |
| T TLF | PSD | ☐ DELETE | 1.1 16 | TLE | | , | | Change | Addition | |
| NAME | JADOON, MOHAMMAD S | | 1.2 N | AME | | · | | | | |
| STREET ADDRESS | 1250 S.W. 27TH AVE. | | 1.3 S | TREET | ADDRESS | | | | | |
| City-St-ZiP | FT. LAUDERDALE FL 33312 | | | ITY-S | r - ZIP | | | | | |
| THE | VTD DELETE JADOON, KHAN AYAZ S | | 21 TI | | ł | · | L. | Change | Addition | |
| NAME | 1250 S.W. 27TH AVE. | | 221 | | | | | | } | |
| STREET ADDRESS | FT. LAUDERDALE FL 33312 | | 2 3 STREET A | | | • | | | | |
| CITY - ST - ZIP THT: E | | | 2 4 C | CITY-S | 1-ZIP | | | Change | Addition | |
| NAVE | | | 3.2 N | | | $\mathbf{r}_{i}=\mathbf{r}_{i}$ | | Unango | 1.00 | |
| STREET ADDRESS | | | | | ADDRESS | | | | | |
| CiTy - SI - ZIP | | | 3.4. CITY- | | | | | | | |
| TILLE | | DELETE | 4.1 73 | | | | L | Change | Addition | |
| NAME | | | 4. 2 NAME | | | | | | | |
| STREET ADDSESS | | | 4.3 STREE | | ADDRESS | | | | | |
| C(1 y - S1 - Z(0) | | | 4.4 CITY- | | T - ZIP | | | | | |
| TITLE | | DELETE | 5.1 1 | TLE | | | L | Change | Addition | |
| NAME | | | 5.2 NAME | | | | | | | |
| STREET ADDRESS | | | 1 | | ADDRESS | | | | ļ | |
| CITY-ST ZIP | | Lociete | | ITY-S | T-ZIP | | | Chapes | Addition | |
| TITLE | | ☐ DÉLETE | 6.1 Ti | | | | L | J Change | Addition | |
| NAME CTOCKLARSONS | | | 6.2 N | | ADDRECE | | | | | |
| STREET ADDRESS | | | | | ADDRESS | | | | | |
| 14. I do hereb | by certify that the information supplied | d with this filing does not qual | | ITY-S | | in Section 119.07(3)(i), Florida Statutes | . I further ce | rtify 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 comparation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes, and that my name appears in Black 12 or Black 13 if shanged, or on an attachment with an address.

SIGNATURE: