

NOW: FILING FEE AFTER MAY 1 IS \$210.00

**CORPORATION
ANNUAL REPORT
1995**



FLORIDA DEPARTMENT OF STATE
Sandra B. Matham
Secretary of State
DIVISION OF CORPORATIONS

**APPROVED
AND
FILED**

95 MAY -1 PM 1:53

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # P94000013462 (4)

Corporation Name
TASHSMI, INC.

000001522200
-06/23/95--01077--006
****200.00 ****200.00

DO NOT WRITE IN THIS SPACE

Principal Office & Business Mailing Address
2929 E. COMMERCIAL BLVD.
BARNETT BANK TOWER-PH-A
FORT LAUDERDALE FL 33308

1. Date Incorporated or Qualified 02/17/1994
2. Date of Last Report N.A.
3. FBI Number 65-0485080
4. Certificate of Status Desired ☐ \$8.75 Additional Fee Required
5. ☐ \$5.00 May Be Added to Fees
6. This corporation has liability for intangible tax under S. 190 (6), Florida Statutes ☐ Yes ☐ No

21. 22. 23. 24. 25. 26. 27. 28. 29. 30.

Name and Address of Current Registered Agent
VECCHIO, JOSEPH A JR.
2929 E. COMMERCIAL BLVD.
BARNETT BANK TOWER-PH-A
FORT LAUDERDALE FL 33308

10. Name and Address of New Registered Agent
81. Name
82. (P.O. Box Number is Not Acceptable)
83.
84. City
85. Zip Code FL

I, the undersigned, being a resident of the State of Florida, do hereby certify that the above-named corporation submits this statement for the purpose of changing its registered office or registered agent in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent.

Signature of Registered Agent: [Signature] Date: [Blank]

OFFICERS AND DIRECTORS		1.1	1.2
PD	SHAikh, SHABIR	1.1 TITLE	☐ Change ☐ Add
2929 E. COMMERCIAL BLVD. PH-A		1.2 NAME	
FORT LAUDERDALE FL 33308		1.3 STREET ADDRESS	
		1.4 CITY, ST, ZIP	
V	SHAikh, SABINA	2.1 TITLE	☒ Change ☐ Add
2929 E. COMMERCIAL BLVD. PH-A		2.2 NAME	SHAikh SABINA
FORT LAUDERDALE FL 33308		2.3 STREET ADDRESS	2929 E. COMMERCIAL BLVD PH-A
		2.4 CITY, ST, ZIP	FORT LAUDERDALE FL 33308
S	ALI, S M	3.1 TITLE	☐ Change ☐ Add
2929 E. COMMERCIAL BLVD. PH-A		3.2 NAME	S.
FORT LAUDERDALE FL 33308		3.3 STREET ADDRESS	
		3.4 CITY, ST, ZIP	
		4.1 TITLE	☐ Change ☐ Add
		4.2 NAME	
		4.3 STREET ADDRESS	
		4.4 CITY, ST, ZIP	
		5.1 TITLE	☐ Change ☐ Add
		5.2 NAME	
		5.3 STREET ADDRESS	
		5.4 CITY, ST, ZIP	
		6.1 TITLE	☐ Change ☐ Add
		6.2 NAME	
		6.3 STREET ADDRESS	
		6.4 CITY, ST, ZIP	

I, the undersigned, do hereby certify that the information furnished with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 110(4)(b), Florida Statutes. I further certify that the information published on the 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. I am an officer, 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 on Block 1 of Form 13 if changed, or on an attachment with an address.

Signature: [Signature] (SHABIR A. SHAikh) 4/26/95 1305
PRESIDENT AND DIRECTOR 77027761