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PROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P94000024568 (5)

ALYSHA ENTERPRISES, INC.

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SECARE A CONSTAIR TALLA VARALL, FLORIDA

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APOPKA FL 32704 APOPKA FL 32705 APOPKA	Principal Place of Business	Mailing Address			- I 1881/1864 ING 1811/ BYON CENT OFFIX BOTH BEND	INDIA DIODIA DANAP UNISA ABAH 1906
2. Principal Place of Business 2. Multiply Artificials 3. Sulfa, Api a, etc. 3. Sulfa, A				DO NOT WRITE IN THIS SPACE		
Sulfe, Apt #, etc.					03/24/1994	
Size Apt #, etc. Sec. Apt	<u> </u>					Applied For
20 City & State City & State City & State Country St. Certificate of Status Desired Fee Required Fee Fee Fee Fee Fee Fee Fee Fee Fee F	Suite And H. etc.				59-3240449	
City & State	22	hn			5. Certificate of Status Desired	•
28	City & State	- · · · - · · · · · · · · · · · · · · ·			6 Flection Campaign Financing	
25	23	28				
28		Zφ	Country	<i>,</i>	8. This corporation owes or has paid the	current year Intangible
JAMAL, AKBER M 3015 WINDCHIME CIRCLE WEST APOPKA FL 32703 82 Street Address (P.O. Box Number is Not Acceptable)			30			
### STREET ADDRESS ###################################		nt Registered Agent		r	10. Name and Address of New Register	ad Agent
APOPKA FL 32703 83			81	Name		
Ball City			82	Street Add	ress (P.O. Box Number is Not Acceptable)	
Section Sections Sections Sections Sections Sections Section	74 0110112 02700		83			
The Pursuant to the provisions of Sections 607 0509 and 607 1698. Florida Statutes, the above-named corporation submits this statement of the purpose of changing is registered agent. I am familiar with, and accept the obligations of Section 607 0505, Florida Statutes SIGNATURE Signature purpose provided agent and the registered agent agent agent agent agent agent agent agent required whose resisting) 12.			84	City		
office of registered agent, or both, in the State of Londa Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent a				1		
Signature Sign	 Pursuant to the provisions of Sections 607.050 office or registered agent, or both, in the State 	l2 and 607-1508, Horida Stat u ⊧of Florida, Such change wa s	utes, the above authorized by	e-named corp the corpora	poration submits this statement for the purpose tion's board of directors. Liberary accept the a	of changing its registered
Title	agent. I am familiar with, and accept the oblig	ations of Section 607.0505, F	lorida Statute	S.	inerio de di	ippointment as registered
12.	SIGNATURE	than their decade while	NI. Crawlered Ar			
TITLE				en signature requi		
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14. Thereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify 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 corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 13 if changed, or on an altrachment with an address

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