

FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

PROFIT
CORPORATION
ANNUAL REPORT
1996



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

DOCUMENT # **P94000031190 (9)**

1. Corporation Name

THE SAYEED INTERNATIONAL CORPORATION



Principal Place of Business

11236 LOSCO JUNCTION DR S.
JACKSONVILLE FL 32256

Mailing Address

11236 LOSCO JUNCTION DR S.
JACKSONVILLE FL 32256

2. Principal Place of Business

21 8161 MIDDLE FORK WAY

Suite, Apt. #, etc.

22 JACKSONVILLE - FL

City & State

23 FLORIDA

Zip

24 32256

Country

25 DUAL

2a. Mailing Address

26 8161 MIDDLE FORK WAY

Suite, Apt. #, etc.

27 JACKSONVILLE

City & State

28 FLORIDA

Zip

29 32256

Country

30 DUAL

3. Date Incorporated or Qualified
03/23/1994

3a. Date of Last Report
03/07/1995

4. FEI Number

59-3249885

Applied For

Not Applicable

5. Certificate of Status Desired

☒

\$8.75 Additional
Fee Required

6. Election Campaign Financing
Trust Fund Contribution

☒

\$5.00 May Be
Added to Fees

8. This corporation has liability for intangible tax under s. 199.032,
Florida Statutes ☐ Yes ☒ No

9. Name and Address of Current Registered Agent

FISHER, MICHAEL W
ONE INDEPENDENT DRIVE
STE. 2600
JACKSONVILLE FL 32202

10. Name and Address of New Registered Agent

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)

83

84 City

FL

85 Zip Code

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above named corporation submits this statement for the 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, Section 607.0505, Florida Statutes.

SIGNATURE

Signature typed or printed name of registered agent and filer of application

(NOTE: Registered Agent signature required when reinstating)

DATE

12.

OFFICERS AND DIRECTORS

12.1 NAME ☐ DELETE

D
SAYEED, MOHAMMED F
11236 LOSCO JUNCTION DR
JACKSONVILLE FL 32257

12.2 STREET ADDRESS

12.3 CITY - ST - ZIP

12.4 TITLE ☐ DELETE

12.5 NAME ☐ DELETE

12.6 STREET ADDRESS

12.7 CITY - ST - ZIP

12.8 TITLE ☐ DELETE

12.9 NAME ☐ DELETE

12.10 STREET ADDRESS

12.11 CITY - ST - ZIP

12.12 TITLE ☐ DELETE

12.13 NAME ☐ DELETE

12.14 STREET ADDRESS

12.15 CITY - ST - ZIP

12.16 TITLE ☐ DELETE

12.17 NAME ☐ DELETE

12.18 STREET ADDRESS

12.19 CITY - ST - ZIP

12.20 TITLE ☐ DELETE

12.21 NAME ☐ DELETE

12.22 STREET ADDRESS

12.23 CITY - ST - ZIP

12.24 TITLE ☐ DELETE

12.25 NAME ☐ DELETE

12.26 STREET ADDRESS

12.27 CITY - ST - ZIP

13.

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

13.1 TITLE ☐ Change ☐ Addition

13.2 NAME

13.3 STREET ADDRESS

13.4 CITY - ST - ZIP

13.5 TITLE ☐ Change ☐ Addition

13.6 NAME

13.7 STREET ADDRESS

13.8 CITY - ST - ZIP

13.9 TITLE ☐ Change ☐ Addition

13.10 NAME

13.11 STREET ADDRESS

13.12 CITY - ST - ZIP

13.13 TITLE ☐ Change ☐ Addition

13.14 NAME

13.15 STREET ADDRESS

13.16 CITY - ST - ZIP

13.17 TITLE ☐ Change ☐ Addition

13.18 NAME

13.19 STREET ADDRESS

13.20 CITY - ST - ZIP

13.21 TITLE ☐ Change ☐ Addition

13.22 NAME

13.23 STREET ADDRESS

13.24 CITY - ST - ZIP

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), 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 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE:

M. F. Sayeed
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

M. F. SAYEED PRESIDENT

2-5-96

(904) 645-0853

Date

Daytime Phone #

CR2E034 (12/95)