

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

PROFIT
CORPORATION
ANNUAL REPORT
1996



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

DOCUMENT # **P94000045283 (6)**

1. Corporation Name

617 HAMMONDVILLE ROAD PROPERTIES, INC.

Principal Place of Business

**941 NE 19TH AVENUE STE. 301
FORT LAUDERDALE FL 33304**

Mailing Address

**941 NE 19TH AVENUE STE. 301
FORT LAUDERDALE FL 33304**



2. Principal Place of Business

2a. Mailing Address

21 **9941 SW 4th Street**

26 **9941 SW 4th Street**

Suite, Apt. #, etc.

Suite, Apt. #, etc.

22

27

City & State

City & State

23 **Plantation, FL**

28 **Plantation, FL**

Zip

Country

Zip

Country

24 **33324** 25 **USA**

29 **33324** 30 **USA**

9. Name and Address of Current Registered Agent

**HASAN, OSAMAH
941 NE 19TH AVENUE STE. 301
FORT LAUDERDALE FL 33304**

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 607.1505, 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 of Registered Agent (Print Name and Title)

Signature of Officer or Director (Print Name and Title)

DATE

12. OFFICERS AND DIRECTORS

TITLE	D	☐ DELETE
NAME	KAHOOK, NOFAL	
STREET ADDRESS	2400 E. COMMERCIAL BLVD. 204	
CITY-ST-ZIP	FT. LAUDERDALE FL	
TITLE		☐ DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		☐ DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		☐ DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		☐ DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1. TITLE	VP	☒ Change ☐ Addition
2. NAME	Kahook, Nofal	
3. STREET ADDRESS	9941 SW 4th Street	
4. CITY-ST-ZIP	Plantation, FL 33324	
5. TITLE	VP	☐ Change ☒ Addition
6. NAME	Kahook, Muntaha	
7. STREET ADDRESS	9941 SW 4th Street	
8. CITY-ST-ZIP	Plantation, FL 33324	
9. TITLE		☐ Change ☐ Addition
10. NAME		
11. STREET ADDRESS		
12. CITY-ST-ZIP		
13. TITLE		☐ Change ☐ Addition
14. NAME		
15. STREET ADDRESS		
16. CITY-ST-ZIP		
17. TITLE		☐ Change ☐ Addition
18. NAME		
19. STREET ADDRESS		
20. 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 in an attachment with an address.

SIGNATURE:

[Signature]
SIGNATURE AND TYPE OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

3/6/96 (954) 771-3776
DATE TELEPHONE

CR2E034 (12/95)