## FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

**PROFIT** CORPORATION ANNUAL REPORT 1998



ELORIDA DEPARTMENT OF STATE

## Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

## DOCUMENT # P94000045297 (6)

Principal Place of Business	Mailing Address
9941 SW 4TH STREET	9941 SW 4TH STREET
PLANTATION FL 33324	PLANTATION FL 33324
US	US

## **FILED** Feb 10 1998 8:00am Secretary of State

1202 SOUTH AVENUE PROPERTIES, INC. DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified 06/13/1994 2. Principal Place of Business 2s. Mailing Address 4. FEI Number Applied For 65-0499214 Not Applicable Suite, Apt. #, etc Suite, Apt #, etc \$8.75 Additional 5. Certificate of Status Desired Fee Required 22 27 City & State City & State \$5.00 May Be 6. Election Campaign Financing 23 Trust Fund Contribution Added to Fees Country Ζıρ This corporation owes or has paid the current year Intangible 24 25 29 Personal Property Tax due June 30. ☐ Yes 9. Name and Address of Current Registered Agent Name and Address of New Registered Agent Name HASAN, OSAMAH 941 NE 19TH AVENUE 82 STE. 301 FORT LAUDERDALE FL 33304 33308 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. Lam familiar with, and accept the oppositions of Section 607.0505, Florida Statutes. (NOTE: Registered Agent signature required when reinstating) ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 OF ICERS AND DIRECTORS 12. 13. DELETE 1.1 TITLE TATLE KAHOOK, NOFAL 1.2 NAME NAME 9941 SW 4TH STREET 1.3 STREET ADDRESS STREET ADDRESS PLANTATION FL 1.4 CITY-ST-ZIP CITY-ST-ZIP DELETE 21 TITLE ☐ Change ☐ Addition TITLE KAHOOK, MUNTAHA 22 NAME NAME 9941 SW 4TH STREET 2.3 STREET ADDRESS STREET ADDRESS **PLANTATION FL** 2. 4 CITY-ST-ZIP CITY-ST-ZIP DELETE Change Addition 3 1 TITLE TITLE NAME 3.2 NAME STREET ADDRESS 3.3 STREET ADDRESS 3.4 CITY-ST-ZIP CITY-ST-ZIP Addition DELETE Change TITLE 4.1 TITLE 4.2 NAME NAME 4.3 STREET ADDRESS STREET ADDRESS CITY-ST-ZIP 4 4 City+ST-ZiP DELETE Addition TITLE 5.1 TOLE 5.2 NAME NAME 5.3 STREET ADDRESS STREET ADDRESS 5.4 CITY - ST - ZIP CITY - ST - ZIP DELETE 6.1 TITLE Change Addition NAME 6.2 NAME STREET ADDRESS 6 3 STREET ADDRESS 6.4 City-St-ZiP CITY-ST-7IP

14. I hereby 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 12 or Block 13 if changed, or on an attachment with an address

**SIGNATURE**