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

## **PROFIT** CORPORATION ANNUAL REPORT

1998

FLORIDA DEPARTMENT OF STATE

## Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

## DOCUMENT # P94000045319 (8)

2349 NORTH WEST 9TH AVENUE PROPERTIES, INC.

rincipal Place of Business	Mailing Address		
5990 (R) N FEDERAL HWY FT LAUDERDALE FL 33308 US	5990 (R) FEDERAL HWY FT LAUDERDALE FL 33308 US		

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



DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified 06/13/1994 4. FEI Number Applied For 65-0499219 Not Applicable Suite, Apt. #, etc Suite, Apt. #, etc. \$8.75 Additional  $\mathbb{Z}$ 5. Certificate of Status Desired Fee Required City & State City & State Election Campaign Financing \$5.00 May Be Trust Fund Contribution Added to Fees Zip Country  $Z_{1D}$ Country 8. This corporation owes or has paid the current year Intangible 24 Personal Property Tax due June 30. ☐ Yes 30 25 29 9. Name and Address of Current Registered Agent Name and Address of New Registered Agent 81 Name CELIA, ADELITA L C/O NOFAL'S MGMT Street Address (P.O. Box Number is Not Acceptable) 5990 (R) N FEDERAL HWY 83 FT. LAUDERDALE FL 33308 84 City Zip Code 85

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 registored agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. Thereby accept the appointment as registered agent. Lam familiar with, and accept the obligations of, Section 607.0505, Fforida Statutes.					
SIGNATURE Stignature typed or praired name of registers taged and titled apply able (NOTE Registered Agent signature required when reinstating)  DATE					
12.	OFFICERS AND DIRECTORS	13.	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12		
TITLE	PTD DELE	TE 1.1 TITLE	Change Addition		
NAME	KAHOOK, NOFAL	1.2 NAME			
STREET ADDRESS	9941 SW 4TH STREET	1.3 STREET ADDRES	ss		
CITY-ST-ZIP	PLANTATION FL	1.4 CITY-ST-ZIP			
TITLE	VPSD DELE	TE 21 YITLE	Change Addition		
NAME	Dahsheh, Wael	2.2 NAME			
STREET ADDRESS	1681 NW 100TH WAY	2.3 STREET ADDRES	ss		
CITY-ST-ZIP	PLANTATION FL	2 4 CITY-ST-2IP			
TITLE	☐ DELE	TE 31 TITLE	Change Addition		
NAME		3.2 NAME			
STREET ADDRESS		3 3 STREET ADDRES	ss		
CITY-ST-ZIP		3 4. CITY-ST-ZIP			
TITLE	☐ DELE	TE 4.1 TITLE	Change Addition		
NAME :		4. 2 NAME			
STREET ADDRESS		4.3 STREET ADDRES	ss		
CITY-ST-ZIP		4.4 CITY-ST-ZIP			
TITLE	DELE	TE 5.1 TITLE	☐ Change ☐ Addition		
MAME		5.2 NAME			
STREET ADDRESS		5.3 STREET ADDRES	ss		
CITY - ST - ZIP		54 CITY-ST-ZIP			
TITLE	DELE	TE 61 TITLE	Change Addition		
NAME		6.2 NAME			
STREET ADDRESS		6.3 STREET ADDRES	ss		
CITY-ST-ZIP		6.4 CITY-ST-ZIP			

I hereby certify that the information supplied with this hing 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 suppliemental 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: