

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

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97 SEP 25 AM 10:10

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

65-0523941

PROFIT CORPORATION ANNUAL REPORT 1997

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

DOCUMENT # 994000063661

1. Corporation Name
I HAVE A DREAM SHOPPING CENTER, INC.

Principal Place of Business
279 N.E. 79th Street
Miami, Florida 33138

Mailing Address
same

2. Principal Place of Business
21 279 N.E. 79th Street
Suite, Apt. #, etc.
22 City & State
23 Miami, Florida 33138
Zip
24 33138

2a. Mailing Address
26 same
Suite, Apt. #, etc.
27 City & State
28 same
Zip
29 same

Country
25 USA
30 same

3. Date Incorporated or Qualified
8-29-94

3a. Date of Last Report
A-5-96

4. FEI Number
Applied For

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
Mohamed Ibrahim
279 NE 79 Street
Miami, FL 33138
Same but address is corrected

10. Name and Address of New Registered Agent
81 Name
Mohamed Ibrahim
82 Street Address (P.O. Box Number is Not Acceptable)
279 N.E. 79th Street
83
84 City
Miami
FL 85 Zip Code
33138

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 title if applicable (NOTE: Registered Agent's signature required when installing) DATE

12. OFFICERS AND DIRECTORS

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

Director
Elghanam Ibrahim
277 NE 79 St.
Miami, FL 33138

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE
1.2 NAME
1.3 STREET ADDRESS
1.4 CITY-ST-ZIP

Director
Mohamed Ibrahim
279 NE 79 Street
Miami, FL 33138

2.1 TITLE
2.2 NAME
2.3 STREET ADDRESS
2.4 CITY-ST-ZIP

3.1 TITLE
3.2 NAME
3.3 STREET ADDRESS
3.4 CITY-ST-ZIP

4.1 TITLE
4.2 NAME
4.3 STREET ADDRESS
4.4 CITY-ST-ZIP

5.1 TITLE
5.2 NAME
5.3 STREET ADDRESS
5.4 CITY-ST-ZIP

6.1 TITLE
6.2 NAME
6.3 STREET ADDRESS
6.4 CITY-ST-ZIP

14. I do 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 of this report or on an attachment with an address.

SIGNATURE: [Signature]

8/25/97 305-757-9830

CR2E034 (9/96)

(2)

BARBARA B. GIMENEZ

ATTORNEY AT LAW
420 LINCOLN ROAD
SUITE 600
MIAMI BEACH, FLORIDA 33139

PHONE (305) 531-2545
FAX (305) 531-2365

August 25, 1997

Secretary of State
Division of Corporation
P.O. 6327
Tallahassee, Florida 32314

Re: I Have A Dream Shopping Center, Inc.

Dear Sir or Madam:

as address was incorrect. (B)
Please be advised that the captioned corporation was administratively dissolved for failure to file its Annual Report in 1997. However, the principal of this corporation, Mr. Mohamed Ibrahim, advises that the Annual Report forms were never forwarded to him so as to complete the form and pay the annual fee. After conversation with one of your clerks, we were advised to submit the Annual Report form, together with the standard fee of \$165.00, together with an explanation letter advising the reason why the form and fee were not provided on a timely basis and that the penalties could be waived.

Thus, please accept this letter as our request that the penalties be waived and that this Annual Report be accepted with the fee of \$165.00.

Thank you for your cooperation in this matter.

Very truly yours,


BARBARA B. GIMENEZ

BBG/lde
Enclosure as noted.
A:IbrahSEC.LTR