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

**PROFIT CORPORATION ANNUAL REPORT** 

1997



FLORIDA DEPARTMENT OF STATE

## Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

## DOCUMENT # P9400078110 (1) FIRST MECCA GROUP. INC.

Principal Place of Businoss Mailing Address 9941 SW 4TH ST. PLANTATION FL 33324 PLANTATION FL 33324-2801 US										
						3. Date Incorporated or Qualifie 10/25/1994	d 3	03/18/	f Last Report <b>1996</b>	
2. Principal Pla	ace of Business	2a. Mailing Ad 26	2a. Mailing Address 26			DE 0004040			Applied For Not Applicable	
Suite, Apt. #, etc.		Suite, Apt. 27	Suite, Api. #, etc.			5. Certificate of Status Desired	С	] \$	8.75 Additional Fee Required	
City & State		City & State	City & State			Election Campaign Financing     Trust Fund Contribution			\$5.00 May Be Added to Fees	
Zip 24	Country 25	Zip <b>29</b>	30 Cot	intry	/	This corporation has liability for Florida Statutes	or intar			
	9. Name and Address of Cu	rrent Registered Agen	t	81	,	10. Name and Address of New	Regist	ered Age	nt	
SCHOLNIK, LOUIS N 2400 E COMMERCIAL BLVD SUITE 820						Name Street Address (P.O. Box Number is Not Acceptable)				
FT U	AUDERDALE FL 33308			83						
				64	City			FL B	Zip Code	
11. Pursuant to office or re- agent. I am	o the provisions of Sections 607, gistered agent, or both, in the S n familiar with, and accept the o	.0502 and 607,1508, Flo Itale of Florida, Such cha bligations of, Section 60	orida Statutes, the all ange was authorize 7.0505, Florida Stat	bove d by tutes	e-named corpo y the corporations.	oration submits this statement for the on's board of directors. I hereby acc	purpo ept th	ose of cha e appointr	nging its registered nent as registered	
SIGNATURE _										

agent. ra	m lamiliar with, and accept the onligations of, secti	OH GOT. GOOD, FIGHE	ia Sialuius.				
SIGNATURE	Signature, typed or printed move of registered agent and title if applica	salc (NOTER	legistered Agent signature require	ed where reinstating)	DATE		
12.	OFFICERS AND DIRECTORS		13.	ADDITIONS/CHANGES TO OFFICE			
TITLE	U	DELETE	1.1 TITLE		Change	Addilion	
NAME	KAHOOK, NOFAL		1.2 NAME				
STREET ADDRESS	2400 E COMMERICAL BLVD., SUITE 204		1.3 STREET ADDRESS				
CITY-ST-ZIP	FT LAUDERDALE FL		1.4 City - ST- ZiP				
TITLE		DELETE.	2.1 TILLE		Change	Addition	
NAME			2.2 NAME				
STREET ADDRESS			2 3 STREET ADDRESS				
CITY-ST-ZIP			2. 4 CITY - S1 - ZIP				
TITLE		DELETE	3.1 1(1)[6		Change	☐ Addition	
NAME			3.2 NAME				
STREET ADDRESS			3.3 STREET ADDRESS				
CITY-ST-ZIP			3.4. CITY - ST - ZIP				
TITLE		☐ DELETE	4.1 TITLE		Change	Addition	
NAME			4. 2 NAME				
STREET ADDRESS			4.3 STHEET ADDRESS				
CITY-ST-ZIP			4 4 CITY - ST - 7IP				
TITLE		DELETE	5 1 TITLE		Change	Addition	
NAME			5.2 NAME				
STREET ADDRESS			5.3 STREET ADDRESS				
CITY-ST-ZIP	2	. <u> </u>	5.4 City-St-ZiP				
TITLE		☐ DELETE	6.1 TITLE		☐ Change	Addition	
NAME			6.2 NAME				
STREET ADDRESS			6.3 STREET ADDRESS				

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 if changed, or an attachment with an address.

21,100

**FILED** 

Mar 17 1997 8:00am

Secretary of State