

SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER AUGUST 7, 1996.
AMOUNT DUE ON OR BEFORE 8/7/96: \$225 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$375.)

PROFIT
CORPORATION
ANNUAL REPORT
1996



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

DOCUMENT # P95000022569

1. Corporation Name

PERVES AND REHEMATULLAH, INC

Principal Place of Business

Mailing Address

5236 NW 98TH LN
CORAL SPRINGS FL 33067

3. Date Incorporated or Qualified

03/20/1995

3a. Date of Last Report

2. Principal Place of Business

2a. Mailing Address

21 Suite, Apt #, etc

26 Suite, Apt #, etc

22 City & State

27 City & State

23 Zip

Country

28 Zip

Country

5. Certificate of Status Desired ☐
6. Election Campaign Financing
Trust Fund Contribution ☐

\$8.75 Additional
Fee Required
\$5.00 May Be
Added to Fees

8. This corporation has liability for intangible tax under s. 199.03,
Florida Statutes. ☒ Yes ☐ No

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

KIRUDDINAN BALASUBRAMANIAM
2348 NW 94TH AVE
CORAL SPRINGS FL 33065

81 Name PERVEZ PLASTICWALA
82 Street Address (P.O. Box Number is Not Acceptable)
5236 NW 98TH LN
83
84 City CORAL SPRINGS FL 85 Zip Code 33067

11. Pursuant to the provisions of Sections 607.0602 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 this appointment as registered agent. I am familiar with and accept the obligations of Section 607.0503, Florida Statutes.

SIGNATURE

PERVEZ R. PLASTICWALA

08-14-96

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE D
NAME PERVEZ PLASTICWALA
STREET ADDRESS 5236 NW 98TH LN
CITY-ST-ZIP CORAL SPRINGS FL 33067

TITLE D
NAME REHEMATULLAH
STREET ADDRESS 5236 NW 98TH LN
CITY-ST-ZIP CORAL SPRINGS FL 33067

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11 TITLE
12 NAME
13 STREET ADDRESS
14 CITY-ST-ZIP

21 TITLE
22 NAME
23 STREET ADDRESS
24 CITY-ST-ZIP

31 TITLE
32 NAME
33 STREET ADDRESS
34 CITY-ST-ZIP

41 TITLE
42 NAME
43 STREET ADDRESS
44 CITY-ST-ZIP

51 TITLE
52 NAME
53 STREET ADDRESS
54 CITY-ST-ZIP

61 TITLE
62 NAME
63 STREET ADDRESS
64 CITY-ST-ZIP

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-08/20/96--01040--015
***225.00

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 on an attachment with an address.

SIGNATURE: PERVEZ R. PLASTICWALA PERVEZ PLASTICWALA

08-14-96

305-525-3836

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

CR2E034 (3/96)