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**PROFIT** CORPORATION ANNUAL REPORT



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

1996

P95000027826 (3)

DOCUMENT #  1. Corporation Name	F
EGYPTIQUITIES INC.	

	TIQUITIES, INC.		1					
Principal Place of 1401 SE 9 / UNIT 4N	AVE	Mailing Address 1401 SE 9 / UNIT 4N	AVE			11 <b>44</b> 111 <b>54</b> 114 11	)	
POMPANO E	BEACH FL 33060	POMPANO I	BEACH FL 33060		3. Date Incorporated or Qualified 04/07/1995	3a. Date	of Last Rep	port
2. Principa! Pia	ace of Business	2a, Mailing Add	ress	,	4. FEI Number 05736	290	_ <b>├</b> ──	pplied For ot Applicable
Suite, Apt. #	₹, etc.	Suite, Apt. 1	#, etc.		5. Certificate of Status Desired		•	Additional equired
City & State		City & State	)		Election Campaign Financing     Trust Fund Contribution			May Be to Fees
Zip 24	Country 25	Zip <b>29</b>	Country 30	/ 	This corporation has lability for its Florida Statutes      This corporation has lability for its Florida Statutes      This corporation has lability for its Florida Statutes	□ No		199.032,
	g. Name and Address of Cur	rent Registered Agent		<sub>1</sub>	10. Name and Address of New R	egistered A	gent	
	_		81					
	lawyer .Meria ave		82		ress (P.O. Box Number is Not Acceptab	le)		
CORAL	GABLES FL 33134		83	i				
			84	City		FL	85 Zip	Code
or registere	o the provisions of Sections 607.05 ed agent, or both, in the State of FI th, and accept the obligations of, S	lorida. Such change was	s authorized by the corp	named corpor poration's boa	ration submits this statement for the pured of directors. Thereby accept the appe	pose of char ointment as i	nging its re registered a	egistered office agent. I am
DICMATE IDE								
SIGNATURE		and the ordered and adds	MINE Bondow An	Of Samuel Review for the me	na schara zopodat mi	[IA]		
<u></u>	Signature: typed or phinted han elof registered as OFFICERS.		(NDTE Registere: Agr	Id Sajoetare requie	a when renetating:  ADDITIONS/CHANGES TO OFF	IVATE	DIRECTOR	RS IN 12
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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 it 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.

3-25-96 954-781-2775