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 # P95000047862 (4)

FILED Feb 25 1998 8:00am Secretary of State

 Corporatio 	CENTER, INC.	00047802 (4)			
Principal Place	e of Business	Mailing Address	, 11 - 4 - 1	I ERDINODI MO COLOL BAMI BAMI DAME DAME BRAN DA	his drams daise mille liet shet
•		8026 WINDPINE CT.			
ORLANDO FL 32812		ORLANDO FL 32819			
				DO NOT WRITE IN THIS	SPACE
				3. Date Incorporated or Qualified 06/16/1995	
2. Principal Place of Business		2a. Mailing Address		4, FEI Number	Applied For
		26		59-3324657	Not Applicable
Suite, Apt. #, etc.		Suite, Apt. #, etc.		5. Certificate of Status Desired	\$8.75 Additional Fee Required
City & State		City & State		Election Campaign Financing	\$5.00 May Be
23		28		Trust Fund Contribution	Added to Fees
—, ^{Zip}	Country	Zip	Country	8. This corporation owes or has paid the cu	
24	25	29	30	Personal Property Tax due June 30. 10. Name and Address of New Registered	☐ Yes ☐ No
	g, Name and Address of Cu	rrent Hegistered Agent	81 Name	10. Name and Address of New Registered	ı Ağeni
AWADALLAH, BASEM					
8026 WINDPINE CT			82 Street Addre	ess (P.O. Box Number is Not Acceptable)	
ORLANDO FL 32819			83		
			84 City	FL	85 Zip Code
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 signature required when reinstating). DATE					
12.		AND DIRECTORS	13.	ADDITIONS/CHANGES TO OFFICERS AN	D DIRECTORS IN 12
TITLE	P	DELETE	1.1 TITLE	,	Change Addition
NAME	AWADULLAH, BASEM		1.2 NAME		
STREET ADDRESS	8026 WINDPINE CT		1.3 STREET ADDRESS		
CITY-ST-ZIP	ORLANDO FL 32819		1.4 C/TY-ST-ZIP		
TITLE		DELE TE	21 TITLE		Change Addition
NAME			2.2 NAME		
STREET ADDRESS			2.3 STREET ADDRESS		
CITY-ST-ZIP			2. 4 CITY-ST-ZIP		
TITLE		☐ DELETE	3.1 TITLE		Change Addition
NAME			3.2 NAME		
STREET ADDRESS			3.3 STREET ADDRESS		
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 ADDRESS		
CITY-ST-ZIP		DELETE	4.4 CITY-ST-ZIP		Change Addition
TITLE		□ DECCIE	5.1 TITLE 5.2 NAME		
NAME STREET ANDRESS			5.3 STREET ADDRESS		
STREET ADDRESS			5.4 CITY-ST-ZIP		
CITY-ST-ZIP TITLE		DELETE	6.1 TITLE		☐ Change ☐ Addition
NAME		bour	6.2 NAME		
STREET ADDRESS			6.3 STREET ADDRESS		
CITY-ST-ZIP	•		6.4 CITY-ST-ZIP		
14. I hereby o	ertify that the information supplie	d with this filing does not qualify for		Section 119.07(3)(i), Florida Statutes. I further c	ertify that the information

14. I 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 on an attachment with an address.

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