## 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 # P950000 63618

NADI INTERNATIONAL INC

FILED
Jun 02 1998 8:00am
Secretary of State

1411DZ ZIVICKIW VI VI Z							
Principal Place of Business Mailing Address P. O. Box 1191					<del>71</del>		
1067 SOUTHWEST OKEECHOBEE FL. 34973					3 DO NOT WRITE IN THIS SPACE		
DEERFIELED. BEACH Fl. 33441.					98/17/1995		
2. Principal Place of Business         2a. Ma           21         26			failing Address			4. FEI Number 65-0608755 Applied For Not Applicable	
Suite, Apl.	#, <b>el</b> c.	Suite, Apt				5. Certificate of Status Desired See Required Fee Required	
City & State	a	City & Stat	City & State			6. Election Campaign Financing \$5.00 May Be Trust Fund Contribution	
Zip 24	p Country Z <sub>IP</sub> Co			Country	/	8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. Yes No	
	9. Name and Address of Curren	A	ot .	81	T Name	10. Name and Address of New Registered Agent	
GH	4NIM, DARWISH	. A					
	2201 S.W. 28 TH St #9				82 Street Address (P.O. Box Number is Not Acceptable)		
•	• • • • • • • • • • • • • • • • • • • •				<del> </del>	A A A A A A A A A A A A A A A A A A A	
OKE	echobbe fl.3	54974		84	Cia	85 Zip Code	
<u></u>						<u> </u>	
						corporation submits this statement for the purpose of changing its registered oration'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	Control of the contro	or constructional and	MOTE Pool	list and fine	Unio- alivo ros	equired when reinstating) DATE	
12.	Signature typed or printed name of registered age OFFICERS AND			13.	eni sigi ature rea	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	PRESIDENT.			1.1 TITLE		Change Addition	
NAME	GHANIM, DARWISH, A. 12		1.2 NAME				
STREET ADDRESS	GHANIM, DARWISH, A. 12 2201 S.W. 28TH. St. # 9. 13 OKEECHOBEE FC 34974		1.3 \$1REE1	I ADDRESS			
CITY-ST-ZII <sup>1</sup>	OKEECHOBEE I	FC 3 <b>4</b> 974		1.4 CITY - 5	51 - 7(P		
TITLE			DELETE	2.1 TITLE		Change Addition	
NAME				2.2 NAME			
STREET ADDRESS				2.3 STREET			
CITY-ST-ZIP TITLE		····		2. 4 CITY-5 3.1 TITLE	SI-ZIP	Change Addition	
NAME		٥		3.2 NAME			
STREET ADDRESS				3.3 STREET	FADDRESS		
City-ST-ZIP				3.4. CITY - 5			
TITLE				4.1 TITLE		Change Addition	
NAME I			1.4	4. 2 NAME		16/1/2	
STREET ADDRESS			: 4	4.3 STREET	F ADDRESS	4()(//	
CITY-ST-ZIP	<u> </u>			4.4 CITY - S	ST-ZIP	100/0	
TITLE				5 1 TITLE		☐ Change ☐ Addition	
NAME				5.2 NAME		50000254 <u>673</u> 5	
STREET ADDRESS				5.3 STREET		500002546735 -06/04/9801002006	
CITY-ST-ZIP TITLE				5.4 CITY - S 6.1 THLE	SI-ZIP	***150 (10) Change Addition	
NAME				6.2 NAME			
STREET ADDRESS					I ADDRESS		
CITY-ST-ZIP				6.4 CITY-S			
14. I hereby o	certify that the information supplied w	ith this filing does r	not qualify for the	exemp	tion stated	d 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 of 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 of an attachment with a paddress.							