


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

FILED
May 07 1997 8:00am
Secretary of State

PROFIT CORPORATION ANNUAL REPORT 1997		 FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS	
DOCUMENT # <i>P95 0000 76680</i>			
1. Corporation Name AL-MAHMOOD INTERNATIONAL, INC.			
Principal Place of Business 1375 H N.W. 40th AVENUE LAUDERHILL FL 33313		Mailing Address 1375 H N.W. 40th AVENUE LAUDERHILL FL 33313	

2. Principal Place of Business 21 State: Apr #, etc 22 City & State 23 Zip 24 Country		2a. Mailing Address 25 Suite, Apt #, etc 27 City & State 28 Zip 29 Country		3. Date Incorporated or Qualified 10/6/95		3a. Date of Last Report 4/96	
4. FEI Number 65-0621010		Applied For <input type="checkbox"/> Not Applicable		5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required		6. Election Campaign Financing <input type="checkbox"/> \$5.00 May Be Added to Fees	
7. This corporation has liability for intangible tax under s. 199.032, Florida Statutes <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No							

9. Name and Address of Current Registered Agent ISMAIL, MOHAMMAD R. 1375 H N.W. 40th AVENUE LAUDERHILL FL 33313				10. Name and Address of New Registered Agent 81 Name 82 Street Address (P.O. Box Number is Not Acceptable) 83 84 City FL 85 Zip Code			
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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]* **DATE** *4/29/97*

12. OFFICERS AND DIRECTORS				13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12			
11 TITLE NAME ISMAIL, MOHAMMAD <input type="checkbox"/> DELETE STREET ADDRESS 1375 H N.W. 40th AVE CITY-ST-ZIP LAUDERHILL FL 33313				11 TITLE <input type="checkbox"/> Change <input type="checkbox"/> Addition 12 NAME 13 STREET ADDRESS 14 CITY-ST-ZIP			
11 TITLE <input type="checkbox"/> DELETE NAME ANWAR Z. MOTEN STREET ADDRESS (same) CITY-ST-ZIP				21 TITLE <input type="checkbox"/> Change <input type="checkbox"/> Addition 22 NAME 23 STREET ADDRESS 24 CITY-ST-ZIP			
11 TITLE <input type="checkbox"/> DELETE NAME ABDUL A. ABID STREET ADDRESS (same) CITY-ST-ZIP				31 TITLE <input type="checkbox"/> Change <input type="checkbox"/> Addition 32 NAME 33 STREET ADDRESS 34 CITY-ST-ZIP			
11 TITLE <input type="checkbox"/> DELETE NAME HAROON, FAISAH STREET ADDRESS (same) CITY-ST-ZIP				41 TITLE <input type="checkbox"/> Change <input type="checkbox"/> Addition 42 NAME 43 STREET ADDRESS 44 CITY-ST-ZIP			
11 TITLE <input type="checkbox"/> DELETE NAME STREET ADDRESS CITY-ST-ZIP				51 TITLE <input type="checkbox"/> Change <input type="checkbox"/> Addition 52 NAME 53 STREET ADDRESS 54 CITY-ST-ZIP			
11 TITLE <input type="checkbox"/> DELETE NAME STREET ADDRESS CITY-ST-ZIP				61 TITLE <input type="checkbox"/> Change <input type="checkbox"/> Addition 62 NAME 63 STREET ADDRESS 64 CITY-ST-ZIP			

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 on an attachment with an address.

SIGNATURE: *[Signature]* **DATE** *4-29-97* **Daytime Phone #**

CR2E034 (9/96)