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PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State

DIVISION OF CORPORATIONS

1996

DOCUMENT #

P95000081705 (2)

1. Corporation Name

NEWLOOK ENTERPRISES, INC.



	Pueinees	Maling Address						
ncipal Place of		19060 N.W. 57TH AV	F #302					
19060 N.W. 57 MIAMI FL 3301		MIAMI FL 33015	L. PJAZ					
married t & SSATS					3. Date Incorporated or Qualified 10/23/1995		3a. Date of Last Report	
Principal Place	of Business	2a. Mailing Address		4. FEI Number	. ~~		1	Applied For
Q~3	LO TAPT	ST 26 9075-T	aft stre	ET 65-06	(>70	4		lot Applicable
Suite, Apt #, 6	etc.	Suite, Apt. #. etc		5. Certificate of Sta	tus Desired	П		Additional
		27						Required
City & State	0 1 2 10 10) ES28 PEMBRO	KE PINES	6. Election Campaig				May Be to Fees
PEM	BROKE PIN	16758 REWRKO	Ke Time.	Trust Fund Control 8. This corporation				
Ziρ	. u - &b	₽ ₽7722-24	280 08	Florida Statutes	nas ilability itoriii []] Yes	FINo	IX Under 5	100,002,
3304	9. Name and Address of Cu	TV29 83 02-7	30 3	10. Name and Add			Agent	
	9. Name and Address of Co	arrent negistered Agent	81 Name					
				treet Address (P.O. Box Number is Not Acceptable)				
	ZULFIQAR		82 Street Ad	Idress (P.O. Box Number)	S NOT ACCEPTABLE	<i>⊃1</i>		
	.W. 57TH AVE, #302		83					
miami fi	L 33015		<u></u>				85 Z	o Code
			84 City			FL	. 63 -	J 000G
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14. I do hereby certify that the information signed with a line of the certify that the information indicated on this arrival report or supplemental annual report is true and accurate and that my signature shall have the same legal effect as if made under certify that the information indicated on this arrival report or supplemental annual report is true and accurate and that my signature shall have the same legal effect as if made under certify 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 AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

422/86 (954)4379 pl