


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

FILED  
Mar 18 1997 8:00am  
Secretary of State

PROFIT CORPORATION ANNUAL REPORT <b>1997</b>	 FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
<b>DOCUMENT # P95000084420 (5)</b> 1. Corporation Name <b>DINA OF PLANTATION, INC.</b>	



Principal Place of Business <b>2700 N.E. 33RD STREET FT. LAUDERDALE FL 33306</b>	Mailing Address <b>2700 N.E. 33RD STREET FT. LAUDERDALE FL 33306-1510</b>
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2. Principal Place of Business <b>21 879 N. NOB HILL ROAD</b> Suite, Apt. #, etc.: <b>22</b> City & State <b>23 PLANTATION, FL</b> Zip Country <b>24 33324 25 US</b>		2a. Mailing Address <b>26 879 N. NOB HILL ROAD</b> Suite, Apt. #, etc.: <b>27</b> City & State <b>28 PLANTATION, FL</b> Zip Country <b>29 33324 30 US</b>		3. Date Incorporated or Qualified <b>11/02/1995</b>	3a. Date of Last Report <b>05/14/1996</b>
		4. FEI Number <b>65-0624425</b>		Applied For Not Applicable	
		5. Certificate of Status Desired <input type="checkbox"/>		<b>\$8.75 Additional Fee Required</b>	
		6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/>		<b>\$5.00 May Be Added to Fees</b>	
		8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes <input type="checkbox"/> Yes <input type="checkbox"/> No			

9. Name and Address of Current Registered Agent <b>HASSAN, NOURI 2700 N.E. 33RD STREET FT. LAUDERDALE FL 33306</b>				10. Name and Address of New Registered Agent <b>81 Name HASSAN, NOURI</b> <b>82 Street Address (P.O. Box Number is Not Acceptable) 879 N. NOB HILL ROAD</b> <b>83</b> <b>84 City PLANTATION FL 85 Zip Code 33324</b>			
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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 *Nouri Hassan* (NOTE: Registered Agent signature required when reinstating) DATE

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE NAME STREET ADDRESS CITY-ST-ZIP <input checked="" type="checkbox"/> DELETE	PTD HASSAN, NOURI 2700 N.E. 33RD STREET FT. LAUDERDALE FL 33306	11 TITLE 12 NAME 13 STREET ADDRESS 14 CITY-ST-ZIP <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition	PRESIDENT/DIRECTOR HASSAN, NOURI 879 N. NOB HILL ROAD PLANTATION, FL 33324
TITLE NAME STREET ADDRESS CITY-ST-ZIP <input checked="" type="checkbox"/> DELETE	VPSD HASSAN, KARIMEH J 2700 N.E. 33RD STREET FT. LAUDERDALE FL 33306	21 TITLE 22 NAME 23 STREET ADDRESS 24 CITY-ST-ZIP <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition	TREASURER/SECRETARY/DIRECTOR HASSAN, KARIMEH J. 879 N. NOB HILL ROAD PLANTATION, FL 33324
TITLE NAME STREET ADDRESS CITY-ST-ZIP <input type="checkbox"/> DELETE		31 TITLE 32 NAME 33 STREET ADDRESS 34 CITY-ST-ZIP <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition	VICE PRESIDENT/DIRECTOR HASSAN, ALI 879 N. NOB HILL ROAD PLANTATION, FL 33324
TITLE NAME STREET ADDRESS CITY-ST-ZIP <input type="checkbox"/> DELETE		41 TITLE 42 NAME 43 STREET ADDRESS 44 CITY-ST-ZIP <input type="checkbox"/> Change <input type="checkbox"/> Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP <input type="checkbox"/> DELETE		51 TITLE 52 NAME 53 STREET ADDRESS 54 CITY-ST-ZIP <input type="checkbox"/> Change <input type="checkbox"/> Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP <input type="checkbox"/> DELETE		61 TITLE 62 NAME 63 STREET ADDRESS 64 CITY-ST-ZIP <input type="checkbox"/> Change <input type="checkbox"/> Addition	

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 is dated 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: *Nouri Hassan* Nouri Hassan 3-13-97 (954) 473-9669

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

CR2E034 (9/96)