

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

FILED
Feb 03 1998 8:00am
Secretary of State

PROFIT CORPORATION ANNUAL REPORT 1998		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # P95000084542 (6)
 1. Corporation Name
OVERSEAS ENTERPRISES, INC.



Principal Place of Business 1117 PALM BEACH LAKE BLVD WEST PALM BEACH FL 33401	Mailing Address 1117 PALM BEACH LAKE BLVD WEST PALM BEACH FL 33401
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DO NOT WRITE IN THIS SPACE

21 2. Principal Place of Business	26 2a. Mailing Address
Suite, Apt. #, etc.	Suite, Apt. #, etc.
22 City & State	27 City & State
Zip Country	Zip Country
24	29
25	30

3. Date Incorporated or Qualified
11/01/1995

4. FEI Number
65-0636134

5. Certificate of Status Desired **\$8.75 Additional Fee Required**

6. Election Campaign Financing Trust Fund Contribution **\$5.00 May Be Added to Fees**

8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. Yes No

9. Name and Address of Current Registered Agent

HAQUE, NURUL
1625 N. CONGRESS AVE #324
WEST PALM BEACH FL 33401

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

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. OFFICERS AND DIRECTORS

TITLE	P <input type="checkbox"/> DELETE
NAME	HASAN, MUHAMMAD S
STREET ADDRESS	7403 74TH WAY
CITY-ST-ZIP	WEST PALM BEACH FL 33407
TITLE	ST <input type="checkbox"/> DELETE
NAME	HAQUE, NURUL
STREET ADDRESS	1625 NO CONGRESS AVE., APT 324
CITY-ST-ZIP	WEST PALM BEACH FL 33401
TITLE	VP <input type="checkbox"/> DELETE
NAME	ALAM, SHAMSUL
STREET ADDRESS	1950 N. CONGRESS AVE., APT. J208
CITY-ST-ZIP	WEST PALM BEACH FL 33401
TITLE	VP <input type="checkbox"/> DELETE
NAME	ALI, MOHAMMED
STREET ADDRESS	1720 N CONGRESS AVE APT B107
CITY-ST-ZIP	WPB FL 33401
TITLE	VP <input type="checkbox"/> DELETE
NAME	HUSSAIN, CHOWDHURY F
STREET ADDRESS	5082 WILLOW POND RD. WEST
CITY-ST-ZIP	WEST PALM BEACH FL 33417
TITLE	<input type="checkbox"/> DELETE
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE	VP <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
1.2 NAME	HASAN MUHAMMAD S
1.3 STREET ADDRESS	4383 WILLOW POND CIRCLE.
1.4 CITY-ST-ZIP	WEST PALM BEACH FL- 33417
2.1 TITLE	P <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
2.2 NAME	HAQUE, NURUL
2.3 STREET ADDRESS	1625 N CONGRESS AVE APT# 324
2.4 CITY-ST-ZIP	WEST PALM BEACH FL- 33401
3.1 TITLE	VP <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
3.2 NAME	ALAM, SHAMSUL
3.3 STREET ADDRESS	2050 N. CONGRESS AVE. APT- L207
3.4 CITY-ST-ZIP	WEST PALM BEACH FL- 33401
4.1 TITLE	ST <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
4.2 NAME	ALI, MOHAMMED
4.3 STREET ADDRESS	1720 N CONGRESS AVE APT- B107
4.4 CITY-ST-ZIP	WEST PALM BEACH FL- 33401
5.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
5.2 NAME	
5.3 STREET ADDRESS	
5.4 CITY-ST-ZIP	
6.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
6.2 NAME	
6.3 STREET ADDRESS	
6.4 CITY-ST-ZIP	

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.

SIGNATURE *NURUL HAQUE* *2/3/98* *(561) 655-8910*

CR2E034 (10/97)