FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

1996

DOCUMENT # P9600000021 (1)

DUHMAN, INC.

Principal Place of Business

Mailing Address



10851 CARRIBEAN BLVD. CULER RIDGE FL 33125			10851 CARRIBEAN BLVD. CULER RIDGE FL 33125		Date Incorporated or Qualified	3a. Date of Last Report
					12/29/1995	out of Electropes
6 5	at Divisiona	28. Mailing Address			4. FET Number	Applied For
······	ace of Business	26			65-0665237	Not Applicable
Suite, Apt.	#, etc.	Suite, Apt. #, etc.			5. Certificate of Status Desired	\$8.75 Additional Fee Required
City & State	3	City & State			Election Campaign Financing Trust Fund Contribution	S5.00 May Be Added to Fees
Zip	Country	Zip	Country	/	8. This corporation has liability for	intang ble tax under s. 199.032,
24	25	29	30		The state of the s	No
	9. Name and Address of Curr	ent Registered Agent	81	I Name	10. Name and Address of New F	registered Agent
			61			
	n, abdulrahman		82	Street Addr	ress (P.O. Box Number is Not Acceptat	ole)
	ARRIBEAN BLVD.		83			
CUTLER	RIDGE FL 33125					85 Zip Code
			84	1 '	ration submits this statement for the pured of directors. Thereby accept the app	FL T
SIGNATURE	red agent, or both, in the state of reith, and accept the obligations of, Si	general state of Sugar on the	gene žajamai Aģ	ad signalare respons	and a summitted of the	TIME FICERS AND DIRECTORS IN 12
12.		AND DIRECTORS	1 1 TITLE		Applifolds of all districts	Change Addition
THILE	D WAHDAN, ABDULRAMAN	Приси	1.2 NAME			
NAME						
CIPELL ADDRESS				LADDRESS		
STREET ADDRESS	10851 CARRIBEAN BLVD.			-ST-ZIP		
STREET ADDRESS CITY - ST - ZIP TITLE		C) offle	1.3 STREE	ST-ZIP	IP & SECRETAR	Y & D Change Addition
CITY - S1 - ZIP	10851 CARRIBEAN BLVD. CUTLER RIDGE FL 33125 D MOHAMMAD, NIZAR S	[] DETELE	1.3 STREE 1.4 CHY 2.1 THLE 2.2 NAME	ST-ZIP	IP & SECRETAR	Y & D X Change
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I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(K). 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 eath; 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 or an attachment with an address SIGNATURE: Addition mender-ADD Wrahman-wahdan 5-17-96 (305) 253-0610