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

PROFIT CORPORATION ANNUAL REPORT

1998

1

1



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P9600005734 (4)

THREE AND FAITH PROPERTIES, INC.

Principal Place of Business Mailing Address **6701 BISCAYNE BLVD** 29495 S.W. 152ND AVENUE MIAMI FL 33137 LEISURE CITY FL 33033 DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified 01/16/1996 2a. Mailing Address 4. FEI Number 2. Principal Place of Business Applied For 65-0642096 Not Applicable 26 Suite, Apt. #. etc. Suite, Apt. #, etc. \$8.75 Additional Certificate of Status Desired Fee Required 22 27 City & State City & State \$5.00 May Be 6. Election Campaign Financing 23 28 Trust Fund Contribution Added to Fees Zip Zip Country Country 8. This corporation owes or has paid the current year Intangible Yes □ No 24 30 Personal Property Tax due June 30. 25 29 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent HUQ. EMRANUL 81 Name 29495 S.W. 152ND AVENUE 82 Street Address (P.O. Box Number is Not Acceptable) LEISURE CITY FL 33033 83 84 Zip Code 11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statules, 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 ponted name of registered agent and title if applicable (NOTE Registered Agent signature required when reinstating) 10/97 OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 12. 13. ■ DELETE __ Change Addition TITLE 1.1 TITLE ISLAM, MANZURUL NAME 1.2 NAME CR2E034 11211 SOUTH MILITARY TRAIL #2721 STREET ADDRESS 1.3 STREET ADDRESS **BOYNTON BEACH FL 33436** CITY-ST-ZIP 1.4 CITY-ST-ZIP VD DELETE Change TITLE 2.1 TITLE Addition HUQ. EMRANUL NAME 2.2 NAME 1660 SOUTH CURLEW LANE STREET ADDRESS 2.3 STREET ADDRESS **HOMESTEAD FL 33035** CITY-ST-ZIP 2. 4 CITY - ST-ZIP ☐ DELETE ■ Addition 3.1 TITLE TITLE NIRU, MOSHAMED NAME 3.2 NAME 1757 SOUTH CURLEW LANE STREET ADDRESS **3.3 STREET ADDRESS HOMESTEAD FL 33035** CITY-ST-ZIP 3.4. CITY-ST-ZIP ☐ DELETE Change Addition TITLE 4.1 TITLE AWLAD, HOSSAIN M NAME 4. 2 NAME 1660 S. CURLEW LANE STREET ADDRESS 4.3 STREET ADDRESS **HOMESTEAD FL 33035** CITY-ST-ZIP 4.4 CITY - ST - ZIP DELETE Addition Change TITLE 5.1 THUE NAME 5.2 NAME STREET ADDRESS 5.3 STREE1 ADDRESS

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 13 if changed, or on an attachment with an address.

5.4 CITY-ST-ZIP

6.3 STREET ADDRESS

6.1 TITLE

6.2 NAME

SIGNATURES

CITY-ST-ZIP

STREET ADDRESS

TITLE

NAME

HAV ACULAD AND

DELETE

X 06/10/98

V(305)754650G

Change

☐ Addition

FILED

Apr 20 1998 8:00am

Secretary of State