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Jan 31 1997 8:00am
Secretary of State

PROFIT CORPORATION
ANNUAL REPORT
1997



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P96000008240 (9)

1. Corporation Name
7 ANGELS INVESTMENTS, INC.



Principal Place of Business
7 SOUTHERN CROSS LANE
APARTMENT 202
BOYNTON BEACH FL 33436

Mailing Address
7 SOUTHERN CROSS LANE
APARTMENT 202
BOYNTON BEACH FL 33436-6775

3. Date Incorporated or Qualified: 01/23/1996
3a. Date of Last Report

2. Principal Place of Business

21. 160 585 W. WARFIELD
Suite, Apt. #, etc.

22. City & State

23. INDIAN TOWN, FL

24. 34956 25. U.S.A.

2a. Mailing Address

26. PO BOX - 1877
Suite, Apt. #, etc.

27. City & State

28. INDIAN TOWN, FL

29. 34956 30. U.S.A.

4. FEI Number

65-0649397

Applied For
Not Applicable

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 has liability for intangible tax under s. 199.032, Florida Statutes Yes No

9. Name and Address of Current Registered Agent

HOSSAIN, SYED SHAHABAD
7 SOUTHERN CROSS LANE
APARTMENT 202
BOYNTON BEACH FL 33436

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 DELETE
NAME HOSSAIN, SYED SHAHABAD
STREET ADDRESS 7 SOUTHERN CROSS LANE, APT. 202
CITY-ST-ZIP BOYNTON BEACH FL 33436
[Empty rows for other officers]

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE Change Addition
1.2 NAME
1.3 STREET ADDRESS
1.4 CITY-ST-ZIP
2.1 TITLE Change Addition
2.2 NAME
2.3 STREET ADDRESS
2.4 CITY-ST-ZIP
3.1 TITLE Change Addition
3.2 NAME
3.3 STREET ADDRESS
3.4 CITY-ST-ZIP
4.1 TITLE Change Addition
4.2 NAME
4.3 STREET ADDRESS
4.4 CITY-ST-ZIP
5.1 TITLE Change Addition
5.2 NAME
5.3 STREET ADDRESS
5.4 CITY-ST-ZIP
6.1 TITLE Change Addition
6.2 NAME
6.3 STREET ADDRESS
6.4 CITY-ST-ZIP

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 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: X [Signature]

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

01-25-97

0320692

CR2E034 (9/96)