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PROFIT CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State **DIVISION OF CORPORATIONS**

DOCUMENT # P9600009189

1. Corporation Name

GREAT EASTERN INVESTMENT CORP.

Principal Place of Business	Mailing A
900 OLD FEDERAL HWY HALLANDALE FL 33009 US	4484 SW S Ft. Laude

Mar 01, 1999 8:00 am Secretary of State

03-01-1999 90208 023 ***150.00



Principal Place of E	Business	N	lailing Address					
	00 OLD FEDERAL HWY 4484 SW 50TH ST. ALLANDALE FL 33009 FT. LAUDERDALE FL 33314			DO NOT WRITE IN THIS SPACE				
						3. Date incorporated or Qualifed 01/26/1996		
2. Principal Place	of Business	2a	. Mailing Address			4. FEI Number	pplied For	
·	-	26				65-0740390	lot Applicable	
Suite, Apt. #, et	С.	27	Suite, Apt. #, etc.			\$8.75	Additional lequired	
City & State		28	City & State				May Be to Fees	
Zip	Country 25	29	Zip Cou 30	intry		8. This corporation owes the current year Intangible Personal Property Tax.	□No	
9. Name and Address of Current Registered Agent				10. Name and Address of New Registered Agent				
_				81	Name	-		
MOHAMMED, SYED 4484 SW 50TH ST.		82	Street Addre	ress (P.O. Box Number is Not Acceptable)				
ft. Laui	DERDALE FL 33314			83				
				84		FL 1	Code	
office or regist	ered agent, or both, in the State	of Flori	507.1508, Florida Statutes, the a ida. Such change was authorize f, Section 607.0505, Florida Stat	י עם נ	tne corporation	poration submits this statement for the purpose of changing it on's board of directors. I hereby accept the appointment as r	s registered egistered	

SIGNATURE	Signature, typed or printed name of registered agent and title if applicable. (NOTE:	Registered Agent signature re-	quired when reinstating) DATE			
12.	OFFICERS AND DIRECTORS	13.	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12			
TITLE	DP DELETE	1.1 TITLE		Change	Addition	
NAME	MOHAMMED, SYED	1.2 NAME			į	
STREET ADDRESS	4484 SW 50TH ST.	1.3 STREET ADDRESS				
CITY-ST-ZIP	FT. LAUDERDALE FL 33314	1.4 CITY-ST-ZIP	and the second s		<u> </u>	
TITLE	DV DELETE	2.1 TITLE	•	[] Change	☐ Addition	
NAME	RAHMAN, SHAMIMA	2.2 NAME				
STREET ADDRESS	4484 SW 50TH ST.	2.3 STREET ADDRESS				
CITY-ST-ZIP	FT. LAUDERDALE FL 33314	2. 4 CITY-ST-ZIP				
TITLE	☐ DELETE	3.1 TITLE		Change	☐ Addition	
NAME		3.2 NAME				
STREET ADDRESS		3.3 STREET ADDRESS				
CITY-ST-ZIP		3.4. CITY-ST-ZIP				
TITLE	DELETE	4.1 TITLE		Change	Addition	
NAME		4. 2 NAME				
STREET ADDRESS	•	4.3 STREET ADDRESS				
CITY-ST-ZIP		4.4 CITY-ST-ZIP				
TITLE	DELETE	5.1 TITLE		Change	Addition	
NAME		5.2 NAME	•			
STREET ADDRESS		5.3 STREET ADDRESS				
CITY-ST-ZIP		5.4 CITY-ST-ZIP			:	
TITLE	DELETE	6.1 TITLE		Change	☐ Addition	
NAME		62 NAME				
STREET ADDRESS		6.3 STREET ADDRESS				
CITY-ST-ZIP		64 CITY-ST-ZIP	in Continue 440 07/2)(3) Florido Statutas I further and			

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 discated 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 Lam are officer or director of the corporation or the receiver or trustee ampowered 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, with all other like empowered.

SIGNATURE: