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

PROFIT CORPORATION ANNUAL REPORT 1997



FLORIDA DEPARTMENT OF STATE

## Sandra Be Meriham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P96000015905 (8)

AMIN INTERNATIONAL, INC.

Principal Place of Business

Mailing Address

FILED

97 JUL 16 PM12: 45

SECRETARY OF STATE
TALLAHASSEE, FLORIDA



1803 LIVE OAK ROCKLEDGE FL		1803 LIVE OAK DR N ROCKLEDGE FL 32855-34	416				
					3. Date Incorporated or Qualified 02/19/1996	3a. Date of Las	st Report
2. Principal Place of Business		2a. Mailing Address		4. FLI Number		Applied For	
Suite, Apt. #, otc.		Suite, Apt #, etc.		<b>59 3374 3 59</b> Not Applicable <b>\$8.75</b> Additional			
2	, oto.	27			5. Certificate of Status Desired		Required
City & State		City & State			Election Campaign Financing     Trust Fund Contribution		00 May Be ed to Fees
Zip 4	Country         7ίρ         Country           25         29         30			ry 	8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes Yes No		
	9. Name and Address of Curre	nt Registered Agent		<u> </u>	10. Name and Address of New Re	gistered Agent	
	N, IMTIAZ		8	1 Name			♦.
1212 WALDEN POND COURT ROCKLEDGE FL 32955			8:		dress (P.O. Box Number is Net Acceptab	le)	
•	_		}*				•
	•	•	8.	4 City		FL 85 2	'ip Code
SIGNATURE 5	Signature, typed or printed name of requerred ag		If Registered A	gord's gnature requ	ried when retisibility) ADDITIONS/CHANGES TO OFFIC	DATE	ODC IN 40
TITLE	UFFICERS AN	D DIRECTORS	13. 1,1 Till,6	·····			
NAME	Azmat Khan _ pre	esident	1.2 NAME		200002	24314	21
STREET ADDRESS	Azmat Khan _ Pro 1803 Live Oak D	rive N		T ADDRESS	-07/21/	'9701117	022
CITY-ST-ZIP	Rockledge, FL 3	12955	1.4 CHY-	1	****16	5.00 ***	*165.00
TATLE	Damala G. Khan	DELETE	2.1 TITLE			Chan	ge 🔲 Additio
NAME	Pamela G. Khan 1803 Live Oak D	_ secretary	2.2 NAME	ĺ			
STREET ADDRESS	Rockledge. FL 3	2055		LADDRESS			
CITY-ST-ZIP		DELETE	2. 4 CITY 3.1 TITLE			Chan	ge Additio
NAME	Imtiaz Khan Tre	asurer	3.2 NAME	ľ		2	90
STREET ADDRESS	1212 Walden Pot	nt Court		T ADDRESS			
CITY-ST-ZIP	Rockledge, FL 3	12955	3.4. City	-SI-71P			
TITLE		DELETE	4.1 TITLE			☐ Chan	ge 🔲 Additio
IAME -			4. 2 NAM				
STREET ADDRESS				ET ADORESS			
CITY-SY TIP		DELETE	5.1 TITLE			,Λ Chan	ge 🛕 🔲 Additio
NAME		Lad Dock II	5.2 NAME	Ì			
STREET ADDRESS				ET ADDRESS		JUG J	. '
CITY - ST - ZIP			5.4 CiTY-				
TITLE	:	☐ DELETE	6.1 THE			Chan	ge Additio
NAME			6.2 NAME				
STREET ADDRESS			ľ	1 ADDRESS			
CITY-ST-ZIP	u portify that the information ownless	al with this filter, also a set such	5.4 CITY		nd in Caption 110 (7/2)(i) Florida Statuta	16.41	

4. 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 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 if changed, or or under the corporation of the corporation of the corporation of the receiver of the corporation of the corpora