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PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

1997

DOCUMENT # P9600030886 (1)

FILED May 02 1997 8:00am Secretary of State

Principal Place of Business P.O. BOX 812317 BOCA RATON FL 33481-2317	Mailing Address P.O. BOX B12317 BOCA RATON FL		, Andrew 1997, 11, 11, 11, 11, 11, 11, 11, 11, 11, 1					
				3. Date Incorpora 04/04/1996		3a. Date	of Last R	eport
2. Principal Place of Business	2a. Mailing Addre	ess		4. FEI Number			Ac	plied For
21	26				-065686	5		1 Applicable
Suite, Apt. #, etc.	Suite, Apt. #, o	etc.		5. Certificate of S			\$8.75	
City & State	City & State						Fee Re	<u> </u>
23	28			6. Election Campi Trust Fund Cor	-	П	\$5.00 Added	
Zip Country	Zip	Coun	try	8. This corporation		intanoible ta		
24 25	29	30		Florida Statute		Yes 🗌		100,000,
Name and Address of Cu	rrent Registered Agent			10. Name and Ad	 	egistered Ac	ent	
SAWM, X		6	Name	TAI A	. SHA	H		
850 NW 15TH AVENUE		1	Street Add	lress (P.O. Box Numbe		ble)	e	
BOCA PATON FL 33486		la la	B3	XYO NO	/ 13 ·	<u> </u>		
• (Boca	JKa to	<u>n , Fl</u>		3486
		[6	B4 City			FI	85 Zip (Code
11. Pursuant to the provisions of Sections 607	.0502 and 607.1508, Florid	la Statutes, the abo	ove-named cor	poration submits this s	tatement for the	purpose of c	hanging it	s registered
						int the annal	ntment es	registered
office or registered agent, or both, in the Sagent I am familiar with and accept the c	State of Florida, Such chang obligations of, Section 607,0	ge was authorized 5505, Florida Statu	by the corpora	ition's board of directo	rs. I hereby acce	the ma abbon	intront as	•
~ /A / A/.	State of Florida, Such chancobligations of, Section 607.0	ge was authorized 5505, Florida Statu	by the corporates.	ition's board of directo	rs. I hereby acce	241-9	1	
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12. OFFICERS TITLE D NAME SHAH RAMLOGAN, TAJM/ STREET ADDRESS CITY-ST-2IP BOCA RATON FL 33486	and agent and the if applicable. S AND DIRECTORS DEI ANA N	(NOTE: Registered / 13. LETE 11 TITL 12 NAN 1.3 STR 1.4 CIP	Agent signature requ E AE EET ADORESS Y-ST-ZIP E	lifed when reinstating)	4-,	CERS AND D	DIRECTOR Change	S IN 12 Addition
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