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

Mailing Address

2a. Mailing Address

City & State

Zip

Suite, Apt. #, etc.

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1003 BRIGHT WATER CIRCLE

MAITLAND FL 32751-4225

**PROFIT** CORPORATION ANNUAL REPORT

1997

Principal Place of Business

1003 BRIGHT WATER CIRCLE

2. Principal Place of Business

Suite, Apt. #, etc.

City & State

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MAITLAND FL 32751



FLORIDA DEPARTMENT OF STATE

## Sandra B. Mortham

Secretary of State **DIVISION OF CORPORATIONS** 

DOCUMENT # P96000039741 (9)

SAHARA, INC. OF CENTRAL FLORIDA

Country

29 30 24 25 9. Name and Address of Current Registered Agent Name QADRI. SYED M 1003 BRIGHT WATER CIRCLE **B2** Street Addres MAITLAND FL 32751 83 11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation 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 12. OFFICERS AND DIRECTORS 13. DELETE 1.1 TITLE PD TITLE QADRI, HASEEB 1.2 NAME NAME 1003 BRIGHT WATER CIRCLE 1.3 STREET ADDRESS STREET ADDRESS MAITLAND FL 32751 1.4 CITY-ST-ZIP CITY - S1 - ZIP DELETE 2.1 TITLE TITLE Qadri, Munawwar 2.2 NAME NAME 1003 BRIGHT WATER CIRCLE 2.3 STREET ADDRESS STREET ADDRESS MAITLAND FL 32751 2. 4 CITY-ST-ZIP CITY-ST-ZIP DELETE Change Addition 3 1 TITLE TITLE QADRI, IRFAN 3.2 NAME NAME 1003 BRIGHT WATER CIRCLE 3.3 STREET ADDRESS STREET ADDRESS MAITLAND FL 32751 3.4. CITY-ST-ZIP CITY-ST-ZIP DELETE Change Addition 4.1 TITLE TITLE **QADRI, TASNEEM** 4. 2 NAME NAME 1003 BRIGHT WATER CIRCLE 4.3 STREET ADDRESS STREET ADDRESS MAITLAND FL 32751 4.4 CITY - ST - ZIP CITY-ST-ZIP Addition DELETE ☐ Change 5.1 TITLE TITLE 5.2 NAME NAME 5.3 STREET ADDRESS STREET ADDRESS 5.4 CITY-ST-ZIP CITY-ST-ZIP Change Addition DELETE 61 TITLE 62 NAME NAME **63 STREET ADDRESS** STREET ADDRESS 6.4 CITY-ST-ZIP CITY - \$1 - 7(P) 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.

Country

**FILED** Feb 18 1997 8:00am Secretary of State

	Date Incorporated or Qualified 05/03/1996	3a. Date	e of L	ast Re	port
4.	FEI Number 59 - 33 77 17 6	, > .			plied For t Applicable
5.	Certificate of Status Desired	Ø			dditlonal quired
	Election Campaign Financing Trust Fund Contribution	· · · · · · · · · · · · · · · · · · ·			
8.	This corporation has liability for i	ntangible t Yes	ax ur No	der s	199.032,
	O. Box Number is Not Acceptab		gent		
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		F1	85	Zip (	Code
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ration	n submits this statement for the ploand of directors. I hereby accept	urpose of	chan	ging it	s registered registered
n's b	n submits this statement for the poard of directors. I hereby acceptions to the property of th	ourpose of oit the appo	intmi	ent as	registered

SIGNATURE: \_

SIGNATI ESSA DE QUIRED

407-339-8330