

MP

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PROFIT
CORPORATION
ANNUAL REPORT
1997



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

APPROVED
AND
FILED
1997 JUN 23 AM 9: 50
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # P96000049034 (7)

1. Corporation Name
CONSERVATIVE ENTERPRISES, INC.



59-3394320

Principal Place of Business

2449 FIELDING COURT
ORLANDO FL 32806

Mailing Address

2449 FIELDING COURT
ORLANDO FL 32806-5787

3. Date Incorporated or Qualified

06/07/1996

3a. Date of Last Report

2. Principal Place of Business

21 3934 S. SEMORAN

2a. Mailing Address

26 Suite, Apt. #, etc.

22 Suite, Apt. #, etc.

City & State

23 ORLANDO FL

City & State

27 Suite, Apt. #, etc.

Zip

24 32802

Country

Zip

29

Country

30

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

DUGAN, MOHAMMAD N
2449 FIELDING COURT
ORLANDO FL 32806

10. Name and Address of New Registered Agent

81 Name SHAKEEL A MEMON

82 Street Address (P.O. Box Number is Not Acceptable)

3934 S. SEMORAN

83

84 City ORLANDO

FL

85 Zip Code

32822

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

5/25/97

12. OFFICERS AND DIRECTORS

TITLE D ☐ DELETE

NAME DUGAN, MOHAMMAD N
STREET ADDRESS 2449 FIELDING COURT
CITY-ST-ZIP ORLANDO FL 32806

TITLE ☐ DELETE

NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ DELETE

NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ DELETE

NAME
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CITY-ST-ZIP

TITLE ☐ DELETE

NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ DELETE

NAME
STREET ADDRESS
CITY-ST-ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE D ☒ Change ☐ Addition

1.2 NAME MEMON, SHAKEEL A.
1.3 STREET ADDRESS 3934 S. SEMORAN BLVD
1.4 CITY-ST-ZIP ORLANDO FL 32822

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]

5/25/97

CR2E034 (9/96)