

SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER SEPTEMBER 17, 1997.
AMOUNT DUE ON OR BEFORE 9/17/97: \$550 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$750.)

1 of 2

PROFIT CORPORATION ANNUAL REPORT 1997		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # **P96000054549 (6)**

1. Corporation Name
AWAD SONS, INC.

FILED

97 SEP -4 AM 11:26

SECRETARY OF STATE
TALLAHASSEE, FLORIDA



Principal Place of Business 7670 INTERNATIONAL DRIVE ORLANDO FL 32819	Mailing Address 7670 INTERNATIONAL DRIVE ORLANDO FL 32819
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DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified 06/25/1996		3a. Date of Last Report	
4. FEI Number 59-3386114		Applied For <input type="checkbox"/> Not Applicable	
5. Certificate of Status Desired <input type="checkbox"/>		\$8.75 Additional Fee Required	
6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/>		\$5.00 May Be Added to Fees	
8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No			

2. Principal Place of Business		2a. Mailing Address	
21 Suite, Apt. #, etc.		26 Suite, Apt. #, etc.	
22 City & State		27 City & State	
23 Zip		28 Zip	
24 Country		29 Country	
25		30	

9. Name and Address of Current Registered Agent YOUSEF, ALI A 11940 REEDY CREEK DRIVE STE 205 ORLANDO FL 32836		10. Name and Address of New Registered Agent	
81 Name			
82 Street Address (P.O. Box Number is Not Acceptable)			
83			
84 City		85 Zip Code	

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 _____ (NOTE: Registered Agent signature required when reinstating) _____ DATE _____

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	PD	1.1 TITLE	Change <input type="checkbox"/> Addition <input type="checkbox"/>
NAME	YOUSEF, ALI A	1.2 NAME	
STREET ADDRESS	11940 REEDY CREEK DRIVE STE 205	1.3 STREET ADDRESS	
CITY-ST-ZIP	ORLANDO FL 32836	1.4 CITY-ST-ZIP	
TITLE	VD	2.1 TITLE	Change <input type="checkbox"/> Addition <input type="checkbox"/>
NAME	YOUSEF, HASAN A	2.2 NAME	
STREET ADDRESS	11726 REEDY CREEK DRIVE STE 210	2.3 STREET ADDRESS	
CITY-ST-ZIP	ORLANDO FL 32836	2.4 CITY-ST-ZIP	
TITLE		3.1 TITLE	Change <input type="checkbox"/> Addition <input type="checkbox"/>
NAME		3.2 NAME	
STREET ADDRESS		3.3 STREET ADDRESS	
CITY-ST-ZIP		3.4 CITY-ST-ZIP	
TITLE		4.1 TITLE	Change <input type="checkbox"/> Addition <input type="checkbox"/>
NAME		4.2 NAME	
STREET ADDRESS		4.3 STREET ADDRESS	
CITY-ST-ZIP		4.4 CITY-ST-ZIP	
TITLE		5.1 TITLE	Change <input type="checkbox"/> Addition <input type="checkbox"/>
NAME		5.2 NAME	
STREET ADDRESS		5.3 STREET ADDRESS	
CITY-ST-ZIP		5.4 CITY-ST-ZIP	
TITLE		6.1 TITLE	Change <input type="checkbox"/> Addition <input type="checkbox"/>
NAME		6.2 NAME	
STREET ADDRESS		6.3 STREET ADDRESS	
CITY-ST-ZIP		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 _____

CR2E034 (4/97)

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DOWNTOWN BUSINESS SERVICES

August 25, 1997

Annual Reports Filings
Division of Corporations
P.O. Box 6327
Tallahassee, Florida 32314

Re: Awad Sons Inc.
7670 International Drive
Orlando, Florida 32819
Annual Report 1997

To whom it may concern:

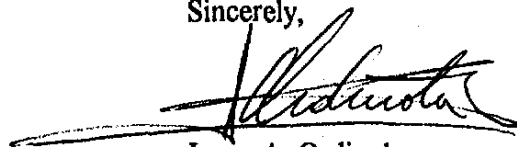
Please be advised that we are the accountants for the above mentioned client. We are writing at their request.

We are in receipt of your second notice for the period in question. Please be advised that our client has never received the original Annual Report and therefore no payment has been made yet.

We would like to request that a payment of \$165.00 herewith attached be accepted as the correct filing fee for 1997. Please also notice that our client started business on January 1, 1997 and perhaps the original report was lost in the mail.

We appreciate the attention to this matter and hope this information is helpful in correcting your records accordingly.

Sincerely,



Jorge A. Ordinola
Accountant