

**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.)**

APPROVED AND FILED *Pg. 1 of 2*

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA



PROFIT CORPORATION ANNUAL REPORT 1997



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

DOCUMENT # **P96000054913 (4)**
1. Corporation Name
MEDAN, INC.

Principal Place of Business: **1012 BELL AIR DRIVE HIGHLAND FL 33487**
Mailing Address: **1012 BELL AIR DRIVE HIGHLAND FL 33487**

DO NOT WRITE IN THIS SPACE

21	2. Principal Place of Business	26	2a. Mailing Address
	1012 Bel Air Drive		1012 Bel Air Drive
22	Suite, Apt. #, etc.	27	Suite, Apt. #, etc.
23	City & State	28	City & State
	Highland Beach, FL		Highland Beach, FL
24	Zip	29	Zip
	33487		33487
25	Country	30	Country
	USA		USA

3.	Date Incorporated or Qualified	3a.	Date of Last Report
	06/25/1996		N/A
4.	FEI Number	<input checked="" type="checkbox"/>	Applied For
	63-0678942	<input type="checkbox"/>	Not Applicable
5.	Certificate of Status Desired	<input checked="" 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 type="checkbox"/> Yes <input checked="" type="checkbox"/> No		

9. Name and Address of Current Registered Agent
**HAKIM, NILI
1012 BELL AIR DRIVE
HIGHLAND BEACH FL 33487**

10. Name and Address of New Registered Agent

B1	Name
B2	Street Address (P.O. Box Number is Not Acceptable)
B3	1012 Bel Air Drive
B4	City
B5	Zip Code
	FL

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 _____

12. OFFICERS AND DIRECTORS

TITLE	D	<input type="checkbox"/> DELETE
NAME	HAKIM, MORRIS M	
STREET ADDRESS	1012 BELL AIR DRIVE	
CITY-ST-ZIP	HIGHLAND FL 33487	
TITLE	D	<input type="checkbox"/> DELETE
NAME	HAKIM, NILI	
STREET ADDRESS	1012 BELL AIR DRIVE	
CITY-ST-ZIP	HIGHLAND FL 33487	
TITLE		<input type="checkbox"/> DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE	Director/Vice President	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
1.2 NAME	Hakim, Morris M, Treasurer	
1.3 STREET ADDRESS	1012 Bel Air Drive	
1.4 CITY-ST-ZIP	Highland Beach, FL 33487	
2.1 TITLE	Director/President	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
2.2 NAME	Hakim, Nili	
2.3 STREET ADDRESS	1012 Bel Air Drive	
2.4 CITY-ST-ZIP	Highland Beach, FL 33487	
3.1 TITLE	Director/Secretary	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
3.2 NAME	Hakim, Anat	
3.3 STREET ADDRESS	170 W. 74th St. #1201	
3.4 CITY-ST-ZIP	New York, NY 10023	
4.1 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
4.2 NAME		
4.3 STREET ADDRESS		
4.4 CITY-ST-ZIP		
5.1 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
5.2 NAME		
5.3 STREET ADDRESS		
5.4 CITY-ST-ZIP		
6.1 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
6.2 NAME		
6.3 STREET ADDRESS		
6.4 CITY-ST-ZIP		

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***165.00 ***165.00

A. Alan
8/13/97

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 _____ DATE _____

CR2E034 (4/97)

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MEDAN INC.

August 7, 1997

Division of Corporations
Annual reports section,
P. O. Box 6327
Tallahassee, FL 32314

Morris Hakim

MEDAN Inc.,
1012 Bel Air Dr.,
Highland Beach, FL 33487

Re: MEDAN Inc., 1997 Annual report.

Gentlemen,

As you probably know, MEDAN was incorporated in 1996 and was not active until recently when it was granted title S corporation. We did not know and never received any notice regarding submitting an annual report. I was surprised recently to receive a notice to submit such a report and even more so, that the corporation has to pay penalty for being late.

I called your office and explained the situation and I was advised to write this letter and to plea for canceling the fine and so I am doing. I am enclosing the completed report and a check for the amount of \$165.0, and asking you to cancel the fine due to the reasons explained above.

Sincerely,



Morris M. Hakim,
Treasurer, MEDAN Inc.