5-15-97 B-7367 MC

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May 15 1997 8:00am
Secretary of State

PROFIT
CORPORATION
ANNUAL REPORT
1997

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

DOCUMENT # **P96000064024 (8)**

1. Corporation Name
PHOENICIAN INTERNATIONAL, CORP.

Principal Place of Business	Mailing Address
4390 SOUTH WEST 154 PLACE **MIAMI FL 33185**	**4390 SOUTH WEST 154 PLACE** **MIAMI FL 33185-5203**

3. Date Incorporated or Qualified: **07/31/1996**
3a. Date of Last Report:

4. FEI Number: 65-0687881 — Applied For / Not Applicable

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

2. Principal Place of Business	2a. Mailing Address
21 3910 SW 56 Ter	26 3910 SW 56 Ter.
22 Suite, Apt. #, etc.	27 Suite, Apt. #, etc.
23 City & State: MIAMI, FL	28 City & State: MIAMI, FL
24 Zip: 33143 25 Country: USA	29 Zip: 33143 30 Country: USA

9. Name and Address of Current Registered Agent

DAYEKH, HASSAN R
4390 SOUTH WEST 154 PLACE
MIAMI FL 33185

10. Name and Address of New Registered Agent

81 Name
82 Street Address (P.O. Box Number is Not Acceptable): 3910 SW 56 Ter
83
84 City: MIAMI **FL** 85 Zip Code: 33143

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			13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12		
TITLE	D	☐ DELETE	1.1 TITLE		☑ Change ☐ Addition
NAME	DAYEKH, HASSAN R		1.2 NAME	3910 SW 56 Ter	
STREET ADDRESS	411 SOUTH EAST 3 TERRACE		1.3 STREET ADDRESS		
CITY-ST-ZIP	POMPANO BEACH FL 33060		1.4 CITY-ST-ZIP	MIAMI, FL 33143	
TITLE	PVST	☐ DELETE	2.1 TITLE		☐ Change ☑ Addition
NAME	DAYEKH, HASSAN R		2.2 NAME	3910 SW 56 Ter	
STREET ADDRESS	411 SOUTH EAST 3 TERRACE		2.3 STREET ADDRESS		
CITY-ST-ZIP	POMPANO BEACH FL 33060		2.4 CITY-ST-ZIP	MIAMI, FL 33143	
TITLE		☐ DELETE	3.1 TITLE		☐ Change ☐ Addition
NAME			3.2 NAME		
STREET ADDRESS			3.3 STREET ADDRESS		
CITY-ST-ZIP			3.4 CITY-ST-ZIP		
TITLE		☐ DELETE	4.1 TITLE		☐ Change ☐ Addition
NAME			4.2 NAME		
STREET ADDRESS			4.3 STREET ADDRESS		
CITY-ST-ZIP			4.4 CITY-ST-ZIP		
TITLE		☐ DELETE	5.1 TITLE		☐ Change ☐ Addition
NAME			5.2 NAME		
STREET ADDRESS			5.3 STREET ADDRESS		
CITY-ST-ZIP			5.4 CITY-ST-ZIP		
TITLE		☐ DELETE	6.1 TITLE		☐ Change ☐ Addition
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 added by an attachment with an address.

SIGNATURE: HASSAN DAYEKH 4/4/97

CR2E034 (9/96)