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

PROFIT CORPORATION ANNUAL REPORT

1998



Secretary of State DIVISION OF CORPORATIONS

OCHMENT

PHILAC	DELPHIA ENTERPRISES, IN				
Principal Place		Mailing Address		(1881) CA 161 CA STAN SOLI SOLI SOLI SOLIO SINO SINO (SIN 1621) SOLIO SINO SI	• 1
\$08 N.W. 57TH STREET		l.			
		GAINESVILLE FL 32805-	4312	DO NOT WRITE IN THIS SPACE	
US		US	••••	3. Date Incorporated or Qualified	
				08/09/1996	
2. Principal Place of Business		2a. Mailing Address		4. FEI Number Applied Fe	or
21		26		59-3395195 Not Applic	
Suite, Apt. #, etc.		Suite, Apt. #, etc.		6. Certificate of Status Desired 58.75 Addition	al
City & State		City & State		Fee Required	
23	•	28		6. Election Campaign Financing \$5.00 May Be Trust Fund Contribution Added to Fees	9
Zip	Country	Zip	Country	8. This corporation owes or has paid the current year Intangible	
24	25	29	30	Personal Property Tax due June 30. Yes No	
	9. Name and Address of Currer	· · · · · · · · · · · · · · · · · · ·		10. Name and Address of New Registered Agent	
WE	BIONER, DONALD W ESQ.		81 Name	Adli Kanadsheh	
10161 CENTURION PARKWAY NORTH			——————————————————————————————————————	dress (P.O. Box Number is Not Acceptable)	
SUITE 190			90	8 N.W. 57th St.	
JA	CKSONVILLE FL 32256		83 Su	ite C	
			R4 City		
			(4)	rporation submits this statement for the purpose of changing its regist	
office or re agent. I as SIGNATURE	egistered agent, or both, in the State or tarnities with and accept the Signature typed or preted name or registered age	of Florida Such change was attigns of, Section 607 0505, Fl ort and title # applicable (NO)	authorized by the corpor orida Statules. E. Rigislered Apent signature req	ration's board of directors. I hereby accept the appointment as register 4/3 DATE DATE	red
12.	OFFICERS AN	D DIRECTORS DELETE	13.	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	KARADSHEH, ADLI J M.D.	☐ Official	1.1 TITLE	El ciande El vo	MINORI
NAME PROFES ADDRESS	833 N.W. 124TH DRIVE		1.2 NAME		
STREET ADDRESS	NEWBERRY FL		1.3 STREET ADDRESS		
CITY-ST-ZIP TITLE	S	☐ DELETE	1.4 CITY-SY-ZIP 2.1 TITLE	Change Ad	Idition
NAME	WEIDNER, DONALD W ESQ.		2.2 NAME		4.1.
STREET ADDRESS	10161 CENTURION PARKWA	Y NORTH .STE. 190	2.3 STREET ADDRESS		
CITY-ST-ZIP	JACKSONVILLE FL		2. 4 CITY-ST-ZIP		
TITLE	D	DELETE	3.1 TITLE	Change Ad	idition
NAME	KARADSHEH, AKRAM		3.2 NAME		
STREET ADDRESS	1641 BEARD S.E.		3.3 STREET ADDRESS		
CITY-ST-ZIP	CASCADE MI		3.4. CITY-ST-ZIP		
TITLE	D	☐ DELETE	4.1 TITLE	Change Ad	ldition
NAME	KARADSHEH, GHAZIE		4. 2 NAME		
STREET ADDRESS	2460 FAWN HILL LANE		4.3 STREET ADDRESS		
CITY-ST-ZIP	AUBURN CA		4.4 CITY-ST-ZIP		
TITLE	D NADADONEM MAN	DELETE	5.1 TITLE	☐ Change ☐ Ad	action
NAME	KARADSHEH, HANI	DT 404	5.2 NAME		
STREET ADDRESS	4042 WOODLAND CREEK, A KENTWOOD MI	F1. IVI	5.3 STREET ADDRESS		ľ
CITY-ST-ZIP TITLE	D NEWLANDON	☐ DELETE	5.4 CITY-ST-ZIP 61 TITLE	☐ Change ☐ Ad	Idition
NAME	KARACHY, RAMZI		6.2 NAME	Charife C Ab	GIRION
STREET ADDRESS	3943 CHAMBERLAIN S.E.				
STREET ADDRESS	ODANO DADIDO EL		6.3 STREET ADDRESS		

14. Thereby certify that the information supplied with this filing does not dealify 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 the analysecurate 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 of trustee they need 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 in attachment with innividees.

FILED

May 12 1998 8:00am

Secretary of State