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

PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Secretary of State DIVISION OF CORPORATIONS

1998 P96000076721 (5)

UNLWW	TED ENTERPRISES OF AN	MEMICA, INC.			J 18818 PANA 18818 11861 1181 1881
Principal Place	e of Rusiness	Mailing Address		— [BBIRDI AN ATAK BARK BARK DUNI NAN ATA	<u> </u>
ļ '		9623 EATON GARDENS	ANC		
9623 EATON GARDENS LANE 9623 EATON GARDENS UNIT 205			FUNC		
		FORT MYERS FL 33919		DO NOT WRITE IN T	HIS SPACE
				3. Date Incorporated or Qualified	
9 Dainet of D	lane of Chairman	Co. Mailing Address		09/13/1996 4. FEI Number	1 14
· · · · · · · · · · · · · · · · · · ·	lace of Business	2a. Mailing Address		1	Applied For Not Applicable
Suite, Apt.	# elc	Suite, Apt. #, etc.		65-0704189	\$8.75 Additional
22		27		5. Certificate of Status Desired	Fee Required
City & State	6	City & State		6. Election Campaign Financing	\$5.00 May Be
23		28		Trust Fund Contribution	Added to Fees
Zip	Country	Ζφ	Country	8. This corporation owes or has paid the	
24	25	29	30	Personal Property Tax due June 30.	Yes No
	9. Name and Address of Curre	ent Registered Agent	81 Name	10. Name and Address of New Registe	red Agent
	DARSANI, MOHAMED		81 Name		
	3 EATON GARDENS LANE		82 Street Add	ress (P.O. Box Number is Not Acceptable)	
1	IT 205		63		
FU	RT MYERS FL 33919		88		
			84 City		B5 Zip Code
11. Pursuant	to the provisions of Sections 607.05	02 and 607 1508 Florida Statut	tos the above-named corr		
office or r	egistered agent, or both, in the Stat	e of Florida. Such change was	authorized by the corpora	poration submits this statement for the purpo- tion's board of directors. I hereby accept the	appointment as registered
1	in tamilar with, and accept the oblig	yations of, Section 607,0505, Fi	onda statutes.		
SIGNATURE	Signature, typed or printed name of registerall as	gont and title if applicable (NO)	E Registered Agent signature requi	ired when reinstating) DA	TE .
12.	OFFICERS AN	ND DIRECTORS	13.	ADDITIONS/CHANGES TO OFFICERS	AND DIRECTORS IN 12
TITLE	PTD	☐ DELETE	1.1 TITLE		Change Addition
NAME	AL-DARSANI, MOHAMED		1.2 NAME		ſ
STREET ADDRESS	9823 EATON GARDENS LN	205	1.3 STREET ADDRESS		ļ
CITY-ST-ZIP	FT MYERS FL		1.4 CITY - ST - ZIP		
TITLE	VSD	☐ DELETE	2 1 TITLE		Change Addition
NAME	ROBERTS, PAULETTE S	* ****	2.2 NAME		
STREET ADDRESS	9623 EATON GARDEN LANE	:, # 205	2 3 STREET ADDRESS		
CITY-ST-ZIP	FORT MYERS FL 33919	DELETE	2.4 CITY-ST-ZIP		Change Addition
TITLE		C office	3.1 TITLE 3.2 NAME		Circulate Circultur
NAME ETREET ADDRESS			3.2 NAME 3.3 STREET ADDRESS		
STREET ADDRESS City-S1-21P			3.4 CITY-ST-ZIP		
TITLE		DELETE	3.4. CHY-SI-ZIP 4.1 TITLE		Change Addition
NAME	•		4. 2 NAME		ا المعادد الله
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			62 NAME		
STREET ADDRESS			6.3 STREET ADDRESS		ſ

14. I 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 trusted 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 the information stated in Section 119.07(3)(i). Florida Statutes. I further certify that the information indicated in Section 119.07(3)(ii). Florida Statutes. I further certify that the information indicated in Section 119.07(3)(ii). Florida Statutes. I further certify that the information indicated in Section 119.07(3)(ii). Florida Statutes. I further certify that the information indicated in Section 119.07(3)(ii). Florida Statutes. I further certify that the information indicated in Section 119.07(3)(ii). Florida Statutes. I further certify that the information indicated in Section 119.07(3)(ii). Florida Statutes. I further certify that the information indicated in Section 119.07(3)(ii). Florida Statutes. I further certify that the information indicated in Section 119.07(3)(ii). Florida Statutes in Section 119.07(3)(iii). Florida

SIGNATURE:

(941) 482-8309

FILED

May 13 1998 8:00am

Secretary of State