

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

PROFIT CORPORATION ANNUAL REPORT AMENDED 1997	 FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # **9600007722 Le**
1. Corporation Name

KABIR ZIA, INC.

Principal Place of Business Mailing Address
2974 Griffin Road **same**
Dania, FL 33312

3. Date Incorporated or Qualified 3a. Date of Last Report
9/17/96 **4/23/97**

2. Principal Place of Business	2a. Mailing Address	4. FEI Number	Applied For
21 Suite, Apt. #, etc.	26 Suite, Apt. #, etc.	65-0691231	<input type="checkbox"/> Not Applicable
22 City & State	27 City & State	5. Certificate of Status Desired	<input type="checkbox"/> \$8.75 Additional Fee Required
23 Zip	28 Zip	6. Election Campaign Financing Trust Fund Contribution	<input type="checkbox"/> \$5.00 May Be Added to Fees
24 Country	29 Country	8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes	<input type="checkbox"/> Yes <input type="checkbox"/> No

9. Name and Address of Current Registered Agent

Jahangir Kabir
2974 Griffin Road
Fort Lauderdale, FL 33312

10. Name and Address of New Registered Agent

81 Name **Ramesh Ramchandani**
82 Street Address (P.O. Box Number is Not Acceptable) **2974 Griffin Road**
83 City **Dania** **FL** **85** Zip Code **33312**

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 **Ramesh Ramchandani**

Ramesh Ramchandani

12/18/97

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 <input checked="" type="checkbox"/> DELETE	1.1 TITLE	D/P/VP/S/T <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	Jahangir Kabir	1.2 NAME	Ramesh Ramchandani
STREET ADDRESS	2974 Griffin Road	1.3 STREET ADDRESS	2974 Griffin Road
CITY-ST-ZIP	Fort Lauderdale, FL 33312	1.4 CITY-ST-ZIP	Dania, FL 33312
TITLE	D <input checked="" type="checkbox"/> DELETE	2.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	Mohammed A. Ziauddin	2.2 NAME	
STREET ADDRESS	2974 Griffin Road	2.3 STREET ADDRESS	
CITY-ST-ZIP	Fort Lauderdale, FL 33312	2.4 CITY-ST-ZIP	
TITLE	D <input checked="" type="checkbox"/> DELETE	3.1 TITLE	
NAME	Yasmin Zia	3.2 NAME	
STREET ADDRESS	2974 Griffin Road	3.3 STREET ADDRESS	
CITY-ST-ZIP	Fort Lauderdale, FL 33312	3.4 CITY-ST-ZIP	
TITLE	D <input checked="" type="checkbox"/> DELETE	4.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	Monowara Kabir	4.2 NAME	
STREET ADDRESS	2974 Griffin Road	4.3 STREET ADDRESS	
CITY-ST-ZIP	Fort Lauderdale, FL 33312	4.4 CITY-ST-ZIP	
TITLE	<input type="checkbox"/> DELETE	5.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		5.2 NAME	
STREET ADDRESS		5.3 STREET ADDRESS	
CITY-ST-ZIP		5.4 CITY-ST-ZIP	
TITLE	<input type="checkbox"/> DELETE	6.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> 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 on an attachment with an address.

SIGNATURE **Ramesh Ramchandani**

Ramesh Ramchandani

FILED
97 DEC 24 AM 10:00
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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