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

Profit Corporation Annual Report

STREET ADORESS CITY-ST-ZIE

SIGNATURE:

appears in Block 12 or Block 13 if changed, or on an attachment with an address

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

FILED

May 15 1997 8:00am

Secretary of State

Daytime Phone #

Secretary of State
DIVISION OF CORPORATIONS

1997

DOCUMENT # P96000080163 (4)

DAKA INVESTMENT GROUP, INC.

Principal Place of Business Mailing Address 5547 W 27TH AVENUE 5547 W 27TH AVENUE HIALEAH FL 33016 HIALEAH FL 33016-4095 3. Date Incorporated or Qualified 3a. Date of Last Report 09/26/1996 2. Principal Place of Business 2a. Mailing Address 4. FEI Number Applied For 26 Not Applicable Suite Apt #, etc Suite, Apt. #, etc. \$8.75 Additional 5. Certificate of Status Desired 22 Fee Required 27 City & State City & State 6. Election Campaign Financing \$5.00 May Be 23 28 Trust Fund Contribution П Added to Fees Zψ Country Zip Country 8. This corporation has liability for intangible tax under s. 199.032, 30 Yes No 24 25 29 Florida Statutes 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent 81 Name AHMAD, SYED 5547 W. 27TH AVENUE 62 Street Address (P.O. Box Number is Not Acceptable) HIALEAH FL 33016 63 84 City 85 Zip Code 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. Tam 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) 12 OFFICERS AND DIRECTORS 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 (96/6)DELETE 100.6 1.1 TITLE Change ___ Addition AHMAD, SYED NAME 12 NAME 5547 W 27TH AVENUE STHEET ADDRESS 1.3 STREET ADDRESS HIALEAH FL 33016 CHTY - \$1 - 7PP 1.4 CITY - ST-ZIP DELETE 1HU 2.1 TITLE Change Addition DAHLAN, THOMAS NAME 22 NAME 5547 W 27TH AVENUE STREET ADDRESS 23 STREET ADDRESS HIALEAH FL 33018 CITY-ST-74P 2 4 CITY - ST - ZIP DELETE THEF 3 1 TITLE Change Addition KHAN, MOHAMMED S NAME 32 NAME 5547 W 27TH AVENUE STREET ADDRESS **33 STREET ADDRESS** HIALEAH FL 33018 CHY-ST-7-P 34. CITY-ST-ZIP DELETE THE 41 TITLE Change Addition NAVGED ANSUM NAME 4 2 NAME 27 7 Avenced 4.3 STREET ADDRESS STREET ADDRESS 00Y-S1 ZiP 44 CITY-ST-ZIP DELETE Change Addition TDF 51 TITLE 52 NAME STREET ADDRESS **5.3 STREET ADDRESS** 54 CITY-ST-ZIP CHY-S1 70 DELETE 61 TITLE Change Addition TITLE NAME 62 NAME

63 STREET ADDRESS

64 CiTY-ST-ZIP

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 eath; 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

14. I do hereby certify that the information supplied with this filling does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes, I further certify that the