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

PRÓFIT **CORPORATION ANNUAL REPORT**



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

1997

DOCUMENT # P96000080267 (3)

RASHID OF ORLANDO, INC.

FILED May 09 1997 8:00am Secretary of State



Principal Place of Business Mailing Address			f 1001/00: 116 13119 dillif datti aanti aatti aatti parti aatti parti aatta atti taati aatti taati			
7521 INTERNATIONAL DRIVE ORLANDO FL 32810		7521 INTERNATIONAL DRIVE ORLANDO FL 32819-8236				
				3. Date Incorporated or Qualified 3a. Date of Last Report 09/27/1996		
2. Principal Pi	lace of Business	2a. Mailing Address		4. FEI Number 3401804 Applied For Not Applied For		
21		26				
Suite, Apt.	#, etc.	Suite, Apt. #, etc.		5. Certificate of Status Desired Sequired \$8.75 Additional Fee Required		
22		City & State				
City & State	в	28		6. Election Campaign Financing \$5.00 May Be Trust Fund Contribution Added to Fees		
Zip	Country	7 _{(p}	Country	This corporation has liability for intangible tax under s. 199.032,		
24	25	29	30	Florida Statutes		
	9. Name and Address of Curr			10. Name and Address of New Registered Agent		
RAS	HID, HARUNUR		81 Name			
7521 INTERNATIONAL DRIVE			82 Street A	ddress (P.O. Box Number is Not Acceptable)		
ORLANDO FL 32819				Service and the service and th		
	·= = · = · - · · =		B3			
			84 City	85 Zip Code		
				FL \ \ \		
office or r agent. La	to the provisions of Sections 607.0 registered agent, or both, in the Str im familiar with, and accept the ob-	isuz and 607, 1508, Fiorida State ate of Florida. Such change was ligations of, Section 607,0505, F	nes, the above-named d authorized by the corpo lorida Stalutes.	corporation submits this statement for the purpose of changing its registered oration's board of directors. I heroby accept the appointment as registered		
SIGNATURE	Signature typed or printed name of registered	agent and title if applicable (NC	TE: Registered Agent signature re	equired when reinstalarg) DATE		
12.		AND DIRECTORS	13.	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12		
TITLE	PSTD	, DELETE	1.1 TITLE	Change Additio		
NAME	rashid, harunur		1.2 NAME			
STREET ADDRESS	6708 BERET DRIVE		1.B STREET ADDRESS			
CITY-ST-ZIP	ORLANDO FL 32809		14 CITY-ST-ZIP	Character Addition		
TITLE		DELETE	2.1 THUE	[_] Change [_] Additio		
NAME			2.2 NAME			
STREET ADDRESS			23 STREET ADDRESS			
CITY-ST-ZIP		DELETE	2. 4 CITY - ST - ZIP	☐ Change ☐ Additio		
TITLE		ات مبدداد	3.1 1111£ 3.2 NAME	. En onango En Mullit		
NAME STREET ADDRESS			3.2 NAME 3.3 STREET ADDRESS			
			3.4. CITY - ST - 7IP			
CITY-ST-ZIP TITLE		DELETE	4.1 3IILE	Change Addition		
NAME		_	4. 2 NAME			
STREET ADDRESS	i		4.3 STREET ADDRESS			
CITY-ST-ZIP			4,4 CHY-\$1-7IP			
TITLE		DELETE	5 1 TITLE	Change Addition		
NAME	i		5.2 NAME			
STREET ADDRESS			5.3 STREET ADDRESS			
CITY-ST-ZIP			5.4 CITY - ST - ZIP			
THTLE		☐ DELETE	61 TILLE	Change Addition		
NAME			6.2 NAME			
STREET ADDRESS			63 STREET ADDRESS			
CITY-ST-ZIP			6.4 CRY-ST-ZIP			
14 Ldo boro	by partituithat the information curre	align with this filing does not aus	alify for the exemption st	lated in Section 119.07(3)(i). Florida Statutes. I further certify that the		

The exemption stated in the mountaint supplies with this iming boos not quality for the exemption stated in section 119.07(3)(), Florida Statutes. I further certify that the information indicated on this 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 appears in Block 12 or Block 13 if changed, or on an attachment with an address.