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FILED

Feb 14 1997 8:00am  
Secretary of State

PROFIT  
CORPORATION  
ANNUAL REPORT  
1997



FLORIDA DEPARTMENT OF STATE  
Sandra B. Mortham  
Secretary of State  
DIVISION OF CORPORATIONS

DOCUMENT # P96000082637 (5)

1. Corporation Name  
POWER 99 INC.



Principal Place of Business  
79 W. PLAZA NORTHSIDE SHOPPING CENTER  
MIAMI FL 33147

Mailing Address  
79 W. PLAZA NORTHSIDE SHOPPING CENTER  
MIAMI FL 33147

3. Date Incorporated or Qualified  
10/03/1996

3a. Date of Last Report  
10/03/1996

4. FEI Number  
65-0705707

5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required

6. Election Campaign Financing Trust Fund Contribution ☐ \$5.00 May Be Added to Fees

8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes ☐ Yes ☒ No

2. Principal Place of Business  
21 18451 S. Dixie Highway  
Suite, Apt. #, etc.  
22  
City & State  
23 Miami Florida  
Zip  
24 33157  
Country  
25 USA

2a. Mailing Address  
26  
Suite, Apt. #, etc.  
27  
City & State  
28  
Zip  
29  
Country  
30

9. Name and Address of Current Registered Agent  
CHAGANI, FIRDOUS  
711 NW 35TH AVE.  
MIAMI FL 33125

10. Name and Address of New Registered Agent  
81 Name CHAGANI, FIRDOUS  
82 Street Address (P.O. Box Number is Not Acceptable)  
19710 NE 10th COURT  
83  
84 City N. MIAMI FL 85 Zip Code 33179

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 *[Signature]* F CHAGANI DATE 2/10/97

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	D	1.1 TITLE	CHAGANI FIRDOUS
NAME	CHAGANI, FIRDOUS	1.2 NAME	1970 N E 10th COURT
STREET ADDRESS	711 NW 35TH AVE.	1.3 STREET ADDRESS	N. MIAMI FL 33179
CITY - ST - ZIP	MIAMI FL 33125	1.4 CITY - ST - ZIP	
TITLE	D	2.1 TITLE	CHARANIA MAHMOOD
NAME	CHARANIA, MAHMOOD R	2.2 NAME	1987 N.W 170 TERRACE
STREET ADDRESS	19710 NE 10TH CT.	2.3 STREET ADDRESS	Pembroke Pines, FL 33028
CITY - ST - ZIP	N. MIAMI BEACH FL 33179	2.4 CITY - ST - ZIP	
TITLE		3.1 TITLE	
NAME		3.2 NAME	
STREET ADDRESS		3.3 STREET ADDRESS	
CITY - ST - ZIP		3.4 CITY - ST - ZIP	
TITLE		4.1 TITLE	
NAME		4.2 NAME	
STREET ADDRESS		4.3 STREET ADDRESS	
CITY - ST - ZIP		4.4 CITY - ST - ZIP	
TITLE		5.1 TITLE	
NAME		5.2 NAME	
STREET ADDRESS		5.3 STREET ADDRESS	
CITY - ST - ZIP		5.4 CITY - ST - ZIP	
TITLE		6.1 TITLE	
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: *[Signature]* F CHAGANI DATE 2/10/97 691-6480

CR2E034 (9/96)