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

PROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STAT

## Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P96000095482 (1)

HRH INTERNATIONAL, INC.

CITY-ST-ZIP

STREET ADDRESS DITY-ST-ZIP

SIGNATURE:

TITLE

NAME

## FILED Mar 14 1997 8:00am Secretary of State

. (90)/400 (10 16:00 6:0) 6:1:1 06:1: 16:1: 40:1: 16:1: 16:1: 16:1: 16:1: 16:1: 16:1: 16:1: 16:1: 16:1: 16:1:

Change

Addition

		, ;,, - ; -,			88709   8191   8111   8486   18719   111   111	
Principal Place of Business Mailing Address						
7830 NW 33RD STREET SUITE 101		7830 NW 33RD STREET SUITE 101				
HOLLYWOOD FI	L 33024	HOLLYWODD FL 33024-2249				
( ) ( )				3. Date Incorporated or Qualified 11/21/1996	3a. Date of Last Report	
2. Principal Place of Business 2a. Mailing Address				4. l'El Number	Applied For	
1		26			Not Applicable	
Sulte, Apt.	#, etc.	Suite, Apt. #, etc.		5. Certificate of Status Desired	\$8.75 Additional Fee Required	
City & State	9	City & State		Election Campaign Financing     Trust Fund Contribution	\$5.00 May Be Added to Fees	
Zip	Country	Zφ	Country	8. This corporation has hability for	intangible tax under s. 199,032,	
4	25	29	30	Florida Statutes	🕰 Yes 🗌 No	
	9. Name and Address of Current	Registered Agent	· · · · · · · · · · · · · · · · · · ·	10. Name and Address of New Re	egistered Agent	
IDMA	IL, HAROON		B1 Name	Market Market		
7830	NW 33RD STREET		82 Street Ad	SMAJL HAROSU Idress (P.O. Box Number is Not Accepta	ble)	
SUIT	E 101		78	30 NW 33-	STROET # 101	
	LYWODD FL 33024		83			
			84 City	Clares a	FL 85 Zip Code	
11 Purquant	to the provisions of Sections 607 0502	and 607 1508. Florida Statutos	the above named or	orporation submits this statement for the ration's board of directors. I hereby acce	purpose of changing its registered	
SIGNATURE	Signature ty Wor protest on a chieg stered right		Registered Agent signature rei		DATE	
12.	OFFICERS AND		13.	ADDITIONS/CHANGES TO OFFI		
TITLE	PO	DELEIL	1.1 1010		Change L Addition	
NAME	ISMAIL, HAROON		1.2 NAME			
STREET ADDRESS	7830 NW 33RD STREET, #101		1.3 STREET ADORESS			
CITY-ST-ZIP	HOLLYWODD FL 33024		1.4 CITY+ S1 - 7/P			
TITLE	VD	☐ DELETE	2.1 TITLE		Change Addition	
NAME	FAISAL, HAROON		2 ? NAME			
STREET ADDRESS	7830 NW 33RD STREET, #101		23 STREET ADDRESS			
CITY-ST-ZIP	HOLLYWODD FL 33024		2 4 CHY+S1-ZIF			
TITLE	10	DETETE	3.1 1111 [		Change Addition	
NAME	ISMAIL, MOHAMMAD R		3.2 NAME			
STREET ADDRESS	7830 NW 33RD STREET, #101		3.3 STRUET ADDRESS			
CITY-ST-2IP	HOLLYWODD FL 33024		3.4 CITY-S1-7IP			
TITLE		DOLLETE	4.1 TILLE		Change Addition	
NAME			4. 2 NAME			
STREET ADDRESS			4.3 STHEET ADDRESS			
CITY-ST-ZIP			4.4 City-St-ZiP			
(TITLE		DELETE	511011		Change Addition	
NAME		<u> </u>	5.2 NAME			
TUMBE	ľ		CONTRACTOR			

DELETE

6 1 10 LE 6 2 NAME

6.3 STREET ADDRESS

14. I do horeby 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 arrural 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.