

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

FILED

Feb 09 1998 8:00am
Secretary of State

PROFIT CORPORATION ANNUAL REPORT 1998		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # P96000100125 (9)

1. Corporation Name
FAIR DEAL, INC.

Principal Place of Business
2524 EAST BUSCH BOULEVARD
TAMPA FL 33612

Mailing Address
2524 EAST BUSCH BOULEVARD
TAMPA FL 33612



DO NOT WRITE IN THIS SPACE

2. Principal Place of Business		2a. Mailing Address		3. Date Incorporated or Qualified 12/11/1996	
21	Suite, Apt. #, etc.	26	Suite, Apt. #, etc.	4. FEI Number 59-3413582	Applied For Not Applicable
22	City & State	27	City & State	5. Certificate of Status Desired	\$8.75 Additional Fee Required
23	Zip	28	Zip	6. Election Campaign Financing Trust Fund Contribution	\$5.00 May Be Added to Fees
24	Country	29	Country	8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	

9. Name and Address of Current Registered Agent

BABUL, BASHIR A
6913 A SOCIETY DR APT A
TAMPA FL 33617

10. Name and Address of New Registered Agent

81 Name SOMANI ASHIQ
82 Street Address (P.O. Box Number is Not Acceptable)
2524 EAST BUSCH BLVD
83
84 City TAMPA FL 85 Zip Code 33612

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, in red or black ink, of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

1/30/98
DATE

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	PTD	1.1 TITLE	PD
NAME	BABUL, BASHIR A	1.2 NAME	SOMANI ASHIQ
STREET ADDRESS	2524 EAST BUSCH BOULEVARD	1.3 STREET ADDRESS	2524 EAST BUSCH BLVD
CITY-ST-ZIP	TAMPA FL 33612	1.4 CITY-ST-ZIP	TAMPA FL-33612
TITLE	VSD	2.1 TITLE	VD
NAME	SOMANI, ASHIQ	2.2 NAME	ZOHRA A. AS SOMANI
STREET ADDRESS	2524 EAST BUSCH BOULEVARD	2.3 STREET ADDRESS	2524 EAST BUSCH BLVD
CITY-ST-ZIP	TAMPA FL 33612	2.4 CITY-ST-ZIP	TPA FL-33612
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 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 REQUIRED

1/30/98

CR2E034 (10/97)