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PROFIT CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P9700005187

1. Corporation Name

KARBORANI, CORP.

FILED Mar 29, 1999 8:00 am Secretary of State

03-29-1999 90093 045 ***150.00

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Principal Place	e of Business	Mailing Address					i seblibbi sig i	1417 I 4 4 14 1 4 1 4 1 4 1 4 1 4 1 4 1 4 1 4		-4191 61161 116	81 48111 TWAL
1140 W. 68 ST.		1140 W. 68 ST.									
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:								O NOT WR		SPACE	
						0	late Incorporated	or Qualifed			147.
2. Principal P	lace of Business	2a. Mailing Address				1	El Number	·		,	Applied For
21	-	26	26				5-0435681				lot Applicable
Suite, Apt. #, etc.		Suite, Apt. #, etc.	Suite, Apt. #, etc.			5. C	ertifcate of Stati	us Desired		·	Additional
22		27	27								Required
City & State		City & State	City & State				lection Campaig				May Be
23		28					rust Fund Contr				to Fees
Zip	Country	Zip	Zip Country			I .	his corporation		rent year Ir		<u> </u>
24	[25]	29	30				ersonal Property			∐ Yes	<u> </u>
	9. Name and Address of Curre	nt Registered Agent				10. N	lame and Addr	ess of New.	Registered	Agent	
MADI	BORANI, ALPHONSE			81	Name						
	W 68 ST.			82	Street A	ddress (P.O	D. Box Number is	s Not Accept	table)		
l e											· · · · · · · · · · · · · · · · · · ·
HIAL	EAH FL 33014			83							
×.				84	City					85 Zip	Code
				154	City				FI	_ " _ "	
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11, Pursuant	to the provisions of Sections 607.05	02 and 607 1508, Florida Sta	tutes, the	above	e-named co	orporation s	submits this state	ement for the	purpose o	f changing i	ts registered
l ⊁office or n	existered agent or both in the State	of Florida, Such change was	s authonze	nd by	the comor	orporation s ation's boar	submits this state rd of directors. I	ement for the hereby acce	purpose o	f changing i intment as	ts registered egistered
≥ office or re agent. I a	to the provisions of Sections 607.05 egistered agent, or both, in the State rn familiar with, and accept the obliga	of Florida, Such change was	s authonze	nd by	the comor	orporation s ation's boar	submits this state rd of directors. I	ement for the hereby acce	purpose o	f changing i intrnent as	ts registered egistered
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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 of the receiver or trusted empowered to explute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, of one attachment with an address, with a primer like empowered.

SIGNATURE: