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

PROFIT CORPORATION ANNUAL REPORT

1998

Suite, Apt #, etc

City & State

 $Z_{\rm ID}$

24

FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

Suite, Apt. #, etc.

City & State

 $Z_{(i)}$

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DOCUMENT # P97000026867 (6)

GHADA ENTERPRISES, INC.

25

CHATILA, GHADA A

ANASTASIA BLVD. 551 ANASTASIA BLVD. AUGUSTINE FL 32084 ST. AUGUSTINE FL 32084

Name and Address of Current Registered Agent

FILED Apr 23 1998 8:00am Secretary of State



DO NOT WRITE IN THIS SPACE

8. This corporation owes or has paid the current year Intangible

Applied For Not Applicable

\$8.75 Additional Fee Required

\$5.00 May Be

Added to Fees

Yes

3. Date Incorporated or Qualified

6. Election Campaign Financing

Personal Property Tax due June 30.

10. Name and Address of New Registered Agent

Trust Fund Contribution

03/20/1997

ST. AUGUSTINE FL 32084			82 Street Address (P.O. Box Number is Not Acceptable)			
	(83 57	MENENDEZR	0	
			B4 City	T-AUGUSTINE	FL 85 Zip Code 32084	
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. Florida Statutes.						
SIGNATURE RIAD A. CHATILA Styriat re- types for pentil distance of respectated upon at and bits of apparents (NOTE Registered Agrees a Superfrequency when re-restating) DATE OPENING DATE						
12.	OFFICERS AND DI		13.	ADDITIONS/CHANGES TO OFF	FICERS AND DIRECTORS IN 12	
TITLE	PTSD	DELFTE TE	11TITLE	DIRECTOR CHATILY RIAD CHATILY SOMENGNOWS R	Change Addition	
NAME	Chatila, Ghada s		. 1.2 NAME	O LAD CHAILO	3 1.10 Cl	
STREET AUDRESS	551 ANASTASIA BLVD.		13 STHEET ADDRESS	SOMENEN DELK	1) SI - MUG I-C	
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STREET ADDRESS			63 STREET ADDRESS			
CITY - ST - ZIP			64 CITY - ST - ZIP	l		
14. Thereby 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 supplienced 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 corrigoration 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						

Country

30

SIGNATURE: GHADAS CHATILA PTSD Chadachelle 4/12/98