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

FILED PROFIT FLORIDA DEPARTMENT OF STATE CORPORATION Apr 27 1998 8:00am Sandra B. Mortham ANNUAL REPORT Secretary of State DIVISION OF CORPORATIONS 1998 Secretary of State P97000028844 **DOCUMENT #**1. Corporation Name TAHA ENTERPRISES, INC. Principal Place of Business Mailing Address 3109 E. ATLANTIC BLVD. 3109 E. ATLANTIC BLVD. POMPANO BEACH FL 33082 POMPANO BEACH FL 33082 DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified 03/31/1997 2. Principal Place of Business 2a. Mailing Address FEI Number Applied For 65-0740204 26 Not Applicable Suite, Apt. #, etc Suite, Apt. #, etc. \$8.75 Additional 6 Certificate of Status Desired Fee Required 22 27 City & State City & State 6, Election Campaign Financing \$5.00 May Be Trust Fund Contribution Added to Fees 23 28 Ζıp Country Zip Country 8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. Yes No. 24 25 29 30 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent 3109 E. ATLANTIC BLVD. Street Address (P.O. Box Number Is Not Acceptable) 82 POMPANO BEACH FL 33062 83 City 85 Zip Code 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, typed or printed name of registered agent and title if applicable (NOTE: Registered Agen) signature required when reinstating) OFFICERS AND DIRECTORS 12 ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 13. DELETE ★ Addition Change TITLE 1.1 TITLE TALA Gary NAME 12 NAME 2326 SE8 TCT STREET ADDRESS 1.3 STREET ADDRESS Pompano Beach Fl 1.4 CITY-ST-ZIP CITY-ST-ZIP DELETE 2.1 TITLE TITLE Nader TALA Ave #1 2.2 NAME NAME 2.3 STREET ADDRESS STREET ADDRESS Pompano Beach Fl 33062 CITY-ST-ZIP 2.4 CITY-ST-ZIP DELETE Change Addition TITLE 3.1 TITLE KhALI TAhA 3.2 NAME NAME 830 SE 22M Ave #4 3.3 STREET ADDRESS STREET ADDRESS Pompano Beach F1 33067 CITY-ST-ZIP 3.4 CITY-ST-ZIP DELETE 4.1 TITLE Change **Addition** TITLE ALLAS MASTI 4. 2 NAME NAME 830 SE 22rd Ave #3 STREET ADDRESS 4.3 STREET ADDRESS Pampano Beach F/ 33062 4.4 CITY-ST-ZIP CITY-ST-7IP DELETE Addition 5.1 TITLE TITLE 5.2 NAME NAME STREET ADDRESS 5.3 STREET ADDRESS 5.4 CITY - ST- ZIP CITY - ST - ZIP Change DELETE 6.1 TITLE ☐ Addition TITLE

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Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE: Khacil Taka Khacil TAHA 4.19.98 954. 182.9467

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

6.2 NAME

6.3 STREET ADDRESS

6.4 CITY - ST - ZIP

NAME

STREET ADDRESS

CITY-ST-ZIP