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

PROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P97000041767 (9)

Country

9. Name and Address of Current Registered Agent

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HAMIDA, INC.

Principal Place of Business

#C1.283

3395 W. HILLSBORO SPACE

DEERFIELD BEACH FL 33442

2. Principal Place of Business

Suite, Apt. #, etc.

City & State

Ζip

Mailing Address

2a. Mailing Address

City & State

Suite, Apt. #, etc.

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3395 W. HILLSBORO SPACE #C 1, 2 & 3

DEERFIELD BEACH FL 33442

Applied For

\$8.75 Additional

Fee Required

\$5.00 May Be

Added to Fees

□ No

Yes

Not Applicable

**FILED** 

Jan 20 1998 8:00am

Secretary of State

DO NOT WRITE IN THIS SPACE

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

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

05/07/1997

MOTIWALA, ASIF			81	Name	
3395 W. HILLSBORO SPACE			82	Street	Address (P.O. Box Number is Not Acceptable)
#C 1, 2 & 3					, , , , , , , , , , , , , , , , , , , ,
DEERFIELD BEACH FL 33442			83		
			84	City	85 Zip Code
70.00.00.00.00.00.00.00.00.00.00.00.00.0					FL   S   S   S   S   S   S   S   S   S
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 appEcable. (NOTE, Registered Agent signature required when reinstating)  DATE					
12.	OFFICERS AND DIRECTORS	ido (1401E, H	13.	ni signatu	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12
TITLE	D	DELETE	1.1 TITLE		Change Addition
NAME	MOTIWALA, ASIF	_	1.2 NAME		
STREET ADDRESS	3395 W. HILLSBORO SPACE		1.3 STREET	ADDRESS	
CITY-ST-ZIP	DEERFIELD BEACH FL 33442		1.4 CITY-S	T- 21P	
TITLE	D	DELETE	2.1 TITLE		☐ Change ☐ Addition G
NAME	iqbal, kamran		2.2 NAME		
STREET ADDRESS	3395 W. HILLSBORO SPACE		2.3 STREET	ADDRESS	
CITY-ST-ZIP	DEERFIELD BEACH FL 33442		2. 4 CITY-S	T-ZIP	·
TITLE		DELETE	3.1 TITLE		Change Addition
NAME			3.2 NAME		
STREET ADDRESS			3.3 STREET	ADDRESS	
CITY - ST - ZIP			3.4. CITY - S	T-ZIP	
TITLE		DELETE	4.1 TITLE		☐ Change ☐ Addition
NAME			4. 2 NAME		
STREET ADDRESS			4.3 STREET	ADDRESS	
CITY-ST-ZIP			4.4 CITY - ST	r-ZiP	
TITLE		DELETE	5.1 TITLE		Change Addition
NAME			5.2 NAME		
STREET ADDRESS			5.3 STREET	ADDRESS	ļ
CITY-ST-ZIP			5.4 CITY - ST	T-ZIP	i i
TITLE		DELETE	6.1 TITLE		☐ Change ☐ Addition
NAME			6.2 NAME		
STREET ADDRESS			6.3 STREET	address	
CITY-ST-ZIP			6.4 CITY-SI		
14. I hereby certify that the Information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(f), Florida Statutes. I further certify that the information indicated on this annual report or 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 feedly or true true 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 opper attackment with an exclusive.					

Country

SIGNATURE: