PROFIT CORPORATION ANNUAL REPORT

1998

Suite, Apt. #, etc.

City & State

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Zip



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P97000044936(7) & GAZALA, INC.

	<i>/</i>
Principal Place of Business	Mailing Address
1821 N.P. 36 STREEP POMPANO BEACH FL 33064	Mailing Address 1821 NE 36 STREET (SAME)
POMPANO BEACH FL-33064	POMPANO BEACH FL 33064
SPARAMO 1821 E.	SAMPLE ROAD
POMPAN	10 BEACH FL 33064
2. Principal Place of Business	2a. Mailing Address

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Country

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified 03/14/1968 Applied For Not Applicable \$8.75 Additional 5. Certificate of Status Desired Fee Required City & State 6. Election Campaign Financing \$5.00 May Be Trust Fund Contribution Added to Fees Country 8. This corporation owes or has paid the current year Intangible

25	29	30	Personal Property rax due June 30. (X) res [] No
9. Name and Addres	ss of Current Registered Agent		10. Name and Address of New Registered Agent
	MERILA WYER	CHARTE	Name
2641 NE 6181 CT. \	343 ALMEIR	A AVE.	2 Street Address (P.O. Box Number is Not Acceptable)
/	CORM. GARSIES	SFL 8	3
	, o popular contraction of	33134 8	4 City FL 85 Zip Code

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.

I	SIGNATURE			
Ì		Signature, typed or printed name of registered agent and title if applicable (NC	D1): Registered Agent signature r	required when reinstating) DATE
Į	12.	OFFICERS AND DIRECTORS	13.	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12
ĺ	TITLE	TO PRESIDENT DELETE	1.1 TITLE	Change Addilio
Į	NAME	PAUK ANNAH KHAN GARRAR K	1.2 NAME	
l	STREET ADDRESS	2841 NB/5119T/GOUBTA & 9Ca 1 NH 43THC7	7. 1.3 STREET ADDRESS	
l	CiTY-ST-ZiP	LUGHTHOUSE DOINT FIX OKAL SPRINGS FL	1.4 CITY-S1-ZIP	
l	TITLE	TRUNSUROR 33064 DELETE	2.1 TITLE	Change Addition
Į	NAME {	KHAN, GAZALA T.	2.2 NAMŁ	
١	STREET ADDRESS	EGGI NN 45TH COVET COKAL SPKINGS FL 33064	2.3 STREET ADDRESS	
ļ	CITY-ST-ZIP	COKAL SPRINGS FL 33009	2.4 CHTY-S1-ZIP	
l	TITLE	[] DELETE	3.1 TITLE	SDDTUZ5591 Change [] Addition
۱	NAME		3.2 NAME	-10/08/38010589 2 9
l	STREET ADDRESS		33 STREE! ADDRESS	***150.00
ļ	CITY-ST-ZIP		34 CiTY-ST-ZiP	****100,00
ĺ	TITLE	[_] DELETE	4.1 TITLE	Spange Addition
I	NAUF		d 2 NAME	

DELETE

	3.4 CiTY-ST-ZiP	
DELETE	4.1 TITLE	1
	4.2 NAME	
	4.3 STREET ADDRESS	
	4.4 CITY-ST-ZIP	
[_] DELETE	5.1 TITLE	
	5.2 NAME	
	5.3 STREET ADDRESS	
	5.4 CITY-ST-7/P	L

☐ Øyange	Addition
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Change	Addition
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Change _ Addition

 Change	Addition

CITY-ST-7IF 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.

6 1 TILLE

6 2 NAME

STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE

NAME

STREET ADDRESS

CR2E034 (5/98)