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 # P97000057152 (5)

ENI INTERNATIONAL, INC.

Principal Place of Business
335 PHILLIPPIE PARKWAY
SAFETY HARBOR FL 34695

2. Principal Place of Business

Suite, Apt. #, etc.

21

Mailing Address

2a. Mailing Address

Suite, Apt. #, etc.

26

335 PHILLIPPIE PARKWAY SAFETY HARBOR FL 34695

FILED Jan 29 1998 8:00am Secretary of State



DO NOT WRITE IN THIS SPACE

Applied For

Not Applicable

3. Date Incorporated or Qualified

06/27/1997

4. FEI Number

22					5. Certificate of Status Desired Fee Required	
City & State City & State					6. Election Campaign Financing \$5.00 May Be	
23	3				Trust Fund Contribution Added to Fees	
Zip	Country	Zip	Country	,	8. This corporation owes or has paid the current year Intangible	
24	25	29 30			Personal Property Tax due June 30. Yes No	
	9, Name and Address of Current	Registered Agent			10. Name and Address of New Registered Agent	
ARFIN, MOHAMMAD R				Name	e	
335 PHILLIPPIE PARKWAY			82	Street	et Address (P.O. Box Number is Not Acceptable)	
SAFETY HARBOR FL 34695]	000	(1 to a box Hamber is Not Acceptable)	
			83			
			84	City	log 70- O- I-	
				_	FL 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						
Office of the	egistered agent, or both, in the state of mailtain and accept the obligation of the colligation of the colline of	ii Fiorida. Such change was autho	orizea by	rine coi	rporation's board of directors. I hereby accept the appointment as registered	
SIGNATURE						
Signature, typed or printed name of registered agent and title if applicable. (NOTE. Registered Agent signature required when reinstating) DATE						
12.	OFFICERS AND		13.		ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	P	DELETE	1.1 TITLE		☐ Change ☐ Addition	
NAME	ARFIN, MOHAMMAD R		1.2 NAME			
STREET ADDRESS	335 PHILLIPPIE PARKWAY		1.3 STREET	ADDRESS	;	
CITY - ST - ZIP	SAFETY HARBOR FL 34695		1.4 CITY-ST-			
TITLE	V	☐ DELETE	2.1 TITLE		☐ Change ☐ Addition	
NAME	ALI, CHOWDHURY F		2.2 NAME		Į.	
STREET ADDRESS	335 PHILLIPPIE PARKWAY		2.3 STREET	ADDRESS		
CITY-ST-ZIP	SAFETY HARBOR FL 34695		2. 4 CITY - S	T-ZIP		
TITLE	T	☐ DELETE	3.1 TITLE		☐ Change ☐ Addition	
NAME	TAYEB, SYED A	1	3.2 NAME			
STREET ADDRESS	335 PHILLIPPIE PARKWAY	i i	3.3 STREET	ADDRESS		
CITY-ST-ZIP	SAFETY HARBOR FL 34695		3.4. CITY-S	T-ZIP		
TITLE		☐ DELETE	4.1 TITLE		Change Addition	
NAME		ľ	4. 2 NAME			
STREET ADDRESS			4.3 STREET	ADDRESS		
CITY-ST-ZIP			4.4 CITY-ST	-ZiP		
TITLE		☐ DELETE	5.1 TITLE		☐ Change ☐ Addition	
NAME		1	5.2 NAME			
STREET ADDRESS		1	5.3 STREET A	ADDRESS		
CITY - ST - ZIP			5.4 CITY-ST	- ZIP		
TITLE	·	☐ DELETE	6.1 TITLE		☐ Change ☐ Addition	
NAME		ţ	6.2 NAME			
STREET ADDRESS			6.3 STREET A	ADDRESS		
CITY-ST-ZIP			6.4 CITY - ST			
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 regions or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in						