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

PROFIT CORPORATION **ANNUAL REPORT**



FLORIDA DEPARTMENT OF STATE Sandra B. Morthams Secretary of State

DIVISION OF CORPORATIONS

1998 DOCUMENT # P97000077249 (5)

FLAMERS INTERNATIONAL CORP.

Country

9. Name and Address of Current Registered Agent

25

JACKSONVILLE FL 32250

DARABI, FARZIN 500 SOUTH 3RD STREET

Principal Place of Business

Mailing Address

2a. Mailing Address

City & State

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Suite, Apt. #, etc.

SOD SOUTH 3RD STREET JACKSONVILLE FL 32250

2. Principal Place of Business

Suite, Apt #, etc

City & State

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Zip

500 SOUTH 3RD STREET JACKSONVILLE FL 32250

FILED Apr 17 1998 8:00am Secretary of State



10. Name and Address of New Registered Agent

Street Address (P.O. Box Number is Not Acceptable)

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

Country

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agent. I a	e gistere d agent, or both, in the state of Florida m <mark>familiar with, and accept the obligations of, t</mark>	Such change was a Section 607.0505, Flo	rida Statules.	oration's board or directors. I hereby accep	the appointment as	registerea
SIGNATURE	Signature, typed or printed harne of registered agent and title it a	amulicable (NOTE	Registered Agent signature to	equired when reinstating)	DATE	
12,	OFFICERS AND DIRECT		13.	ADDITIONS/CHANGES TO OFFIC		S IN 12
TITLE	Ū	DELETE	1.1 TITLE		☐ Change	Addition
NAME	Darabi, Farzin		1.2 NAME			
STREET ADDRESS	159 11TH STREET		1.3 STREET ADDRESS			
CITY-ST-ZIP	ATLANTIC BEACH FL 32233		1.4 CITY - ST - ZIP			
TITLE	D	☐ DELE TE	2.1 TITLE		Change	Addition
NAME	Partow, ramin		2.2 NAME		•	
STREET ADDRESS	335 11TH STREET		2.3 STREET ADDRESS			
CITY-ST-ZIP	ATLANTIC BEACH FL 32233		2. 4 CITY - ST - ZIP			
TITLE	D	DELETE	3.1 TITLE		Change	Addition
NAME	Darabi, Frank		3.2 NAME			
STREET ADDRESS	730 NORTH WALDO ROAD		3.3 STREFT ADDRESS			
CITY-ST-ZIP	GAINESVILLE FL 32601		3.4. CITY - ST - ZIP			1
TITLE		☐ DELETE	4 1 TITLE		□ / / / fange	Addition
NAME			4. 2 NAME		-1/h //	/17
STREET ADDRESS			4.3 STREET ADDRESS		- 1 // 4/	/ 4
CITY-ST-ZIP			4.4 CITY-ST-ZIP		10 11	. /
TITLE		DELETE	5 1 TITLE	00000247	7820ghange	Addition
NAME			5.2 NAME	-04/03/980101	5 0 26	
STREET ADDRESS			5.3 STREET ADDRESS	***600 .00		
CITY-ST-ZIP			5.4 CITY-ST-ZIP			
TITLE		☐ DELETE	6 1 TITLE		☐ Change	☐ Addition
NAME			6.2 NAME			
STREET ADDRESS			6.3 STREET ADDRESS			
0/0/ 07 7/0			6 4 603 V 67 305			

14. 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 or an artisphinent with an address.

104-24-3737

Zip Code