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Mar 17, 1999 8:00 am  
Secretary of State

03-17-1999 90162 027 \*\*\*158.75

PROFIT CORPORATION ANNUAL REPORT 1999



FLORIDA DEPARTMENT OF STATE Katherine Harris Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P97000080989

1. Corporation Name MIRZA ASSOCIATES, INC.



DO NOT WRITE IN THIS SPACE

Principal Place of Business: 701 BRICKELL AVE SUITE 3000 MIAMI FL 33131  
Mailing Address: 701 BRICKELL AVE SUITE 3000 MIAMI FL 33131

3. Date Incorporated or Qualified 09/18/1997

2. Principal Place of Business: 21 13100 MUSTANG TRAIL  
2a. Mailing Address: 26 13100 MUSTANG TRAIL  
Suite, Apt. #, etc: 22

4. FEI Number 65-0786202 Applied For Not Applicable  
5. Certificate of Status Desired X \$8.75 Additional Fee Required

23 City & State: FORT LAUDERDALE FL  
28 City & State: FORT LAUDERDALE FL  
24 Zip: 33330 Country: USA  
29 Zip: FL 33330 Country: USA

6. Election Campaign Financing Trust Fund Contribution \$5.00 May Be Added to Fees  
8. This corporation owes the current year Intangible Personal Property Tax Yes No

9. Name and Address of Current Registered Agent  
INTRASTATE REGISTERED AGENT CORPORATION  
701 BRICKELL AVENUE  
SUITE 3000  
MIAMI FL 33131

10. Name and Address of New Registered Agent  
81 Name: KHALID M. MIRZA  
82 Street Address: 13100 MUSTANG TRAIL  
83  
84 City: FORT LAUDERDALE FL 85 Zip Code: 33330

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: KHALID M. MIRZA 3-14-99  
Signature typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) DATE

Table with 5 columns: TITLE, NAME, STREET ADDRESS, CITY-ST-ZIP, and a DELETED checkbox. Row 1: DPST, MIRZA, KHALID, 701 BRICKELL AVE, STE 3000, MIAMI FL 33131.

Table with 5 columns: 11 TITLE, 12 NAME, 13 STREET ADDRESS, 14 CITY-ST-ZIP, and checkboxes for Change/Addition. Row 1: DPST, KHALID M. MIRZA, 13100 MUSTANG TRAIL, FORT LAUDERDALE FL 33330.

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 the address, with all other like empowered

SIGNATURE: [Signature] 3-14-99 305-904-0874  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

CR2E034 (11/98)