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

PROFIT CORPORATION ANNUAL REPORT

1998



TLORIDA DEPARTMENT ÓF STATE

Sandra B. Morthan

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P97000092371 (8)

NOVELTY EXPRESS, INC.

FILED Apr 20 1998 8:00am Secretary of State



Principal Place of Business Mailing Address						
·		1425 TUSKAWILLA ROA	•			
1425 TUSKAWILLA ROAD SUITE 193		SUITE 193				
WINTER SPRINGS FL 32708		WINTER SPRINGS FL 3	WINTER SPRINGS FL 32708			DO NOT WRITE IN THIS SPACE.
						3. Date Incorporated or Qualified 10/28/1997
2. Principal	Place of Business	2a. Mailing Address				4. FEI Number Applied For
21		26				59 - 34 76 \\ Not Applicable
Suite, Apl	t. #, etc.	Suite, Apt #, etc.				5. Certificate of Status Desired S8.75 Additional
22 City & Cityle		27				Fee Required
City & State		City & State				6. Election Campaign Financing \$5.00 May Be Trust Fund Contribution Added to Fees
23 Zip	Country	7 _{IP}	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 Curren					10. Name and Address of New Registered Agent
343 ALMERIA AVENUE CORAL GABLES FL 33134				81	Name	
				82 Street Address (P.O. Box Number is Not Acceptable)		
				83		
			ļ	84	City	85 Zip Code
. 44 . 6		20 4 007 41 00 11 11 0				corporation submits this statement for the purpose of changing its registered
office or	registered agent, or both, in the State am familiar with, and accept the oblig	: of Florida. Such change was	authorized	i by	the corp	oration's board of directors. I hereby accept the appointment as registered
	Signature, typed or ported name of registered asp			Ager	id signature r	required whon reinstating) DATE
12.		D DIRECTORS	13.		г	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12
TITLE	PSTD	☐ DELETE		1 1 TITLE 1.2 NAME		Change Addition
NAME ATDOTT ADDRESS	JAMAL, HOUSSAM OMAR 1425 TUSKAWILLA ROAD				ADDDECO	a.t. 193
STREET ADDRESS	WINTER SPRINGS FL 32708				ADDRESS	suite 193
CITY-ST-ZIP TITLE	WHILH SPIRIOS IL SEIOS	DELETE		1.4 C(TY-S) 2.1 TITLE		Change Addition
NAME			2 2 NA			
STREET ADDRESS					ADDRESS	
CITY-ST-ZIP			2.401			
TITLE		DELETE	3.1 111	Lŧ		☐ Change ☐ Addition
NAME			3.2 NA	ME		
STREET ADDRESS			3.3 STF	REFT A	ADDRESS	
CITY-ST-ZIP			3.4. CIT	[Y-5]	T-71P	
TITLE		L DELETE	4.1 1111			Change Addition
NAME			4. 2 NA			
STREET ADDRESS					ADDRESS	
CITY-ST-ZiP		☐ DELETE		4.4 CITY - ST - ZIP 5.1 TILLE		Change Addition
TITLE		Duccer	5.1 HH 5.2 NAI			C Change C Robinson
NAME PERCET ADDRESS					ADDRESS	
STREET ADDRESS						
CITY-ST-ZIP		DELETE		5.4 CITY - ST 6.1 TITLE		Change Addition
NAME		C Decert	6.2 NAI			Strongs induition
STREET ADDRESS					ADORESS	j
CITY-ST-ZIP			6.4 CIT			
	certify that the information supplied w	ath this blury does not qualify				d in Section 119.07(3)(i). Florida Statutes. I further certify that the information

14. Thereby 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 trusted employered 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 attachmood with an addition.

APril 3 98 (407) 6965