

SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER SEPTEMBER 15, 1999.
AMOUNT DUE ON OR BEFORE 09/15/99: \$550 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$750).

PROFIT
CORPORATION
ANNUAL REPORT
1999



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

DOCUMENT # **P98000017114** ✓

1. Corporation Name

ARIAN GROUP, INC.

Principal Place of Business

**2000 NE 153RD STREET
MIAMI FL 33162**

Mailing Address

**2000 NE 153RD STREET
MIAMI FL 33162**

2. Principal Place of Business

2a. Mailing Address

21

26

Suite, Apt. #, etc.

Suite, Apt. #, etc.

22

27

City & State

City & State

23

28

Zip

Country

Zip

Country

24

29

30

9. Name and Address of Current Registered Agent

**SHAPIRO, IRA R
16375 NORTHEAST 18TH AVE.
SUITE 225
NORTH MIAMI BEACH FL 33162**

3. Date Incorporated or Qualified

02/23/1998

4. FEI Number

65-0813983

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Election Campaign Financing
Trust Fund Contribution ☐

\$5.00 May Be
Added to Fees

8. This corporation owes the current year
Intangible Personal Property. ☐ Yes ☐ No

DO NOT WRITE IN THIS SPACE

10. Name and Address of New Registered Agent

81 Name

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

83

84 City

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 agent. I am familiar with, and accept the obligations of, section 607.0505, Florida Statutes.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

TITLE **D** ☐ DELETE

NAME **DERAKSHAN, MOHAMMAD**

STREET ADDRESS **2000 NE 153RD STREET**

CITY-ST-ZIP **MIAMI FL 33162**

TITLE **D** ☐ DELETE

NAME **MIRAZ, VIVIAN**

STREET ADDRESS **7549 SW 115TH COURT**

CITY-ST-ZIP **MIAMI FL 33162**

TITLE ☐ DELETE

NAME ☐ DELETE

STREET ADDRESS ☐ DELETE

CITY-ST-ZIP ☐ DELETE

TITLE ☐ DELETE

NAME ☐ DELETE

STREET ADDRESS ☐ DELETE

CITY-ST-ZIP ☐ DELETE

TITLE ☐ DELETE

NAME ☐ DELETE

STREET ADDRESS ☐ DELETE

CITY-ST-ZIP ☐ DELETE

TITLE ☐ DELETE

NAME ☐ DELETE

STREET ADDRESS ☐ DELETE

CITY-ST-ZIP ☐ DELETE

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE ☐ Change ☐ Addition

1.2 NAME

1.3 STREET ADDRESS

1.4 CITY-ST-ZIP

2.1 TITLE ☐ Change ☐ Addition

2.2 NAME

2.3 STREET ADDRESS

2.4 CITY-ST-ZIP

3.1 TITLE ☐ Change ☐ Addition

3.2 NAME

3.3 STREET ADDRESS

3.4 CITY-ST-ZIP

4.1 TITLE ☐ Change ☐ Addition

4.2 NAME

4.3 STREET ADDRESS

4.4 CITY-ST-ZIP

5.1 TITLE ☐ Change ☐ Addition

5.2 NAME

5.3 STREET ADDRESS

5.4 CITY-ST-ZIP

6.1 TITLE ☐ Change ☐ Addition

6.2 NAME

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

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.

SIGNATURE:

MOHAMMAD DERAKSHAN Pres. 7/9/99 (305)9457109

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

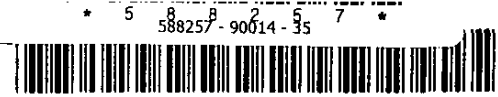
Date

Daytime Phone #

CR2E034 (5/99)

FILED
Jul 14, 1999 8:00 am
Secretary of State

07-14-1999 90014 035 ***150.00



588257-90014-35
P98000017114

July 9th, 1999

From: Arian Group Inc.
2000 N.E 153rd Street
Miami FL 33162

To: **Florida Department of State**
Division of Corporations
P.O.Box 6327
Tallahassee FL 32314

Re:-- -Corporation Annual Report - Doc# P98000017114

Dear Sir or Madam:

I received the 2nd notice of corporation annual report and I realized that I never received the first notice. This is the first time I am filing for corporation and I was not aware of deadline for filing since I never received the first notice.


After I received the 2nd notice I called the phone number on the report to explain the situation and they instructed me to write this letter of explanation. I do not know why I did not receive the first notice but I know the address you have on the form is correct. The Federal ID number is missing which I am adding to the form.

Please extend this favor to us and waive the \$400.00 late fee charge since is the first time we are filing and we did not notice the deadline without receiving the first notice from you.

I am enclosing the complete form along with a check for the amount of \$150.00 for the filing fee.

Once again, I appreciate in advance for your courtesy if you can waive the late fee charges to our new corporation.

Sincerely,


Mohammad Derakhshan
President