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Secretary of State

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PROFIT
CORPORATION
ANNUAL REPORT
1999



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

DOCUMENT # P98000033567

1. Corporation Name

WALID INC.

Principal Place of Business

**2207 E. 13TH AVE.
YBOR CITY FL 33605**

Mailing Address

**2207 E. 13TH AVE.
YBOR CITY FL 33605**



DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

04/10/1998

4. FEI Number

59-3511471

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 Tax. ☐ Yes ☐ No

2. Principal Place of Business

21 Suite, Apt. #, etc.

22 City & State

23 Zip Country

2a. Mailing Address

26 Suite, Apt. #, etc.

27 City & State

28 Zip Country

9. Name and Address of Current Registered Agent

**MADDAH, WALID
2207 E. 13TH AVE.
YBOR CITY FL 33605**

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 PTD ☒ DELETE
NAME CORTIULA, BRUNA
STREET ADDRESS 7501 ULMERTON RD., APT. 2013
CITY-ST-ZIP LARGO FL 33771

TITLE ☐ DELETE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ DELETE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ DELETE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ DELETE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ DELETE
NAME
STREET ADDRESS
CITY-ST-ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE **PRESIDENT** ☒ Change ☐ Addition
1.2 NAME **WALLY MADDAH**
1.3 STREET ADDRESS **7501 ULMERTON RD APT 3013**
1.4 CITY-ST-ZIP **LARGO FL 33771**

2.1 TITLE **VICE-PRESIDENT** ☐ Change ☒ Addition
2.2 NAME **ABED A RAZEK**
2.3 STREET ADDRESS **229 KATHERINE BLVD**
2.4 CITY-ST-ZIP **PALM HARBOR, FL 33624**

3.1 TITLE **PASSIVE INVESTOR** ☐ Change ☒ Addition
3.2 NAME **ANWAR ASKAR**
3.3 STREET ADDRESS **4704 PERCUMMONS WAY**
3.4 CITY-ST-ZIP **TAMPA FL 33624**

4.1 TITLE **TREASURER** ☐ Change ☒ Addition
4.2 NAME **ALI HASAN IRAQ**
4.3 STREET ADDRESS **10318 ZACHARY CIR**
4.4 CITY-ST-ZIP **RIVERVIEW, FL 33569**

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, with all other like empowered.

SIGNATURE:

ALI IRAQ

2/16/99 (813) 241-0999

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E034 (11/98)