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PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

1996

DOCUMENT #

(9)

ANJ FUTURE INVESTMENTS, INC.

FILED May 01, 1996 08:00 AM **Secretary of State**



	Principal Place of Business				Mailing Address							
1680 COLLINS AVE MIAMI BEACH FL 33139				1680 COLLINS AVE MIAMI BEACH FL 33139								
									3. Date Incorporated or Qualified 06/05/1991		ate of Las 04/28/	
2. Principal Pla	ace of Busine	ess	28	. Mailing Address	,				4. FEI Number			Applied For
21			56						65-0274300			Not Applicable
Suite, Apt. #	#, etc.		ļ	Suite, Apt. #, et I	kc.				5. Certificate of Status Desired		• -	.75 Additional ee Required
City & State			27	City & State					6. Election Campaign Financing			5.00 May Be
23	,		28						Trust Fund Contribution			dded to Fees
Zip 24		Country 25	29	Ζφ]	30	Country	,			r intangible		er s 199.032,
	9. Name	and Address of	and the second second become	stered Agent					10. Name and Address of New	Register	d Agent	
						B1	Nan	e				
GILANI I		_				82	Stre	et Address	(P.O. Box Number is Not Accepta	able)		
	OLLINS AV					83	<u> </u>					
MIAMI B	BEACH FL	33139				63						
			•			84	City			F	85	Zip Code
11 Purcuant t	to the provisi	one of Spetions 60	07 0502 and 6	07 1508 Florida S	Satutes the	above	namer	corporation	on submits this statement for the p	uroose of	changing	its registered off
or register	red agent or	both, in the State	of Horida, Suc	ch change was au 7.0505, Florida Sta	thorized by '	the corp	coratio	's board	of directors. I hereby accept the ap	pointment	as registi	ered agent. I am
	III, and acce	perne congarons	Or, OBGUILLOU	1.0300, 1101108 018	2.0000							
SIGNATURE .	Signature, typed	coprince name of regist	tered agent and sto	it accordable	(NOTE: Regr	stered Ago	nt signah	ne required wh	ien reinstating)	DATE	·	
12.		OFFICE	ERS AND DIRE			13.			ADDITIONS/CHANGES TO OF	FICERS A		
TITLE	PSD			DELETE		1 1 TITLE					☐ Char	nge 🔲 Addition
								F				
NAME		, NAZIR				1.2 NAME						
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centry that the mornation indicated or this arritran report or suppremental arritran report is not and accurate and that my signature shall have the same regarded as it 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:

Daylinie Phone #