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

CORPORATION ANNUAL REPORT 1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT #

(6)

SAMIRA GHAZAL, P.A.

FILED Mar 30 1998 8:00am Secretary of State



Principal Place of Business Mailing Address									
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Suite, Apt. #. efc. 277 278	2. Principal Pl	ace of Business	2a. Mailing Ad	2a. Mailing Address		4. FEI Number	A	pplied For	
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28 Country Zip Country Zip Country Zip Country Zip Country Zip Country Zip Z	22		27			6. Certificate of Status Desired			
Bolivian Delicities Delic	23		28	28					
9, Name and Address of Current Registered Agent GHAZAL, SAMIRA 500 BILTMORE WAY 1210 CORAL GABLES FL 33134 81	· ·				untry				
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SSO BILTMORE WAY 1210 CORAL GABLES FL 33134 82 Street Address (P.O. Box Number is Not Acceptable) 83 Street Address (P.O. Box Number is Not Acceptable) 84 City FL 85 Zip Code 85 Zip Code 94 City FL 85 Zip Code 95 Zip			urrent Registered Agen		81 Name	10. Name and Address of New H	egistered Agent		
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CORAL GABLES FL 33134 83					82 Street Add	dress (P.O. Box Number is Not Accepte	iple)		
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, pr both, in the Start off lorida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent in an accept the followards of Sciolos 670 0505. (Sprinds Statutes) SIGNATURE Signature syndror princed agent or large face agent and large agent and large agent agen	!= : -				63				
11. Pursuant to the provisions of Sections 607 0502 and 607.150B Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered agent. I am familiar armin and accept the toblishary and 5 coction 607 0505, Florida Statutes agent. I am familiar armin and accept the toblishary and 5 coction 607 0505, Florida Statutes agent. I am familiar armin and accept the toblishary and 5 coction 607 0505, Florida Statutes agent. I am familiar armin and accept the toblishary and 5 coction 607 0505, Florida Statutes agent. I am familiar armin and accept the toblishary and 5 coction 607 0505, Florida Statutes agent. I am familiar armin and accept the toblishary and 5 coction 607 0505, Florida Statutes agent. I am familiar armin and accept the toblishary and 5 coction 607 0505, Florida Statutes agent. I am familiar armin and accept the toblishary and 5 coction 607 0505, Florida Statutes agent. I am familiar armin and the f		NAL CADLES PL 33134			<u> </u>				
SIGNATURE Signature spend or protect regime and line of regulations (), Section 607 0909, Florida Statement () Signature spend or protect regime and line if regulations () (NOTE Registered Agent algorithms required when reconsisting) Sate					'		_ FL <u> </u>		
12.	11. Pursuant to the provisions of Sections 607.0502 and 607.1508. Florida Statules, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the Staty of Storida Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar and, and accept the oblig athors of, Section 607.0505, Florida Statutes.								
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		ertity that the information suppl	lied with this filing does no			n Section 119.07(3)(i) Florida Statutes	I further certify that the	e 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.

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