FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

ANNUAL REPOR
1996

DOCUMENT #

V11488

(6)

1. Corporation		` '			
BANC	AR INTERNATIONAL, INC.			 12014 111021 11002 11004 11004 11004 11004 11004 11004 11004 11004 11004 11004 1100	DI 1811 AIBN 81811 81811 81811 81811 81811 81811
Principal Place	of Business	Mailing Address			
8129 GRANA ORLANDO F		8129 GRANADA BLA Orlando Fl 32836	•		
				3. Date Incorporated or Qualified 02/03/1992	3a. Date of Last Report 04/11/1995
2. Principal Plac	ce of Business	2a, Mailing Address		4. FEI Number	Applied For
1	oo di Bosiness	26		59-3111162	Not Applicable
Suite, Apt. #	, etc.	Suite, Apt. #, etc.		5. Certificate of Status Desired	\$8.75 Additional
22		27		5. Continuate of Olatos Desired	Fee Required
City & State		City & State		6. Election Campaign Financing	\$5.00 May Be
7 ip	Country	Zip	Country	Trust Fund Contribution	Added to Fees
24	25 Codiniy	29	30	This corporation has liability for in Florida Statutes Yes	Ti No
<u></u>	g. Name and Address of Curren			10. Name and Address of New Re	agistered Agent
			81 Name		
BAKSH, MUSTAPHA 8129 GRANADA BLVD.			82 Street Add	ress (P.O. Box Number is Not Acceptabl	e)
	DO FL 32836		83		
OULTU	DO 1 E 02000				
			84 City		FL 85 Zip Code
or registere	o the provisions of Sections 607.0502 ad agent, or both, in the State of Floric n, and accept the obligations of, Secti	la. Such change was authori	zed by the corporation's boa	ration submits this statement for the purp and of directors. I hereby accept the appo	cose of changing its registered office continuent as registered agent. I am
SIGNATURE _			,,,		
	Signature, typed or printed name of registered agent OFFICERS AND		O1£: Registered Agent signature require	ed when reinstating) ADDITIONS/CHANGES TO OFFI	CERS AND DIRECTORS IN 12 Change Addition
12. TITLE	PTS PTS	DELETE	1.1 TITLE	ADDITIONS/CHANGES TO OFFE	Change Addition
NAME	BAKSH, MUSTAPHA		1.2 NAME		
STREET ADDRESS	8129 GRANADA BLVD.		1.3 STREET ADDRESS		
CITY - ST - ZIP	ORLANDO FL		1.4 CITY+ST-ZIP		
TITLE		☐ DELETE	2. 1 TITLE		Change Addition
NAME			2.2 NAME		
STREET ADDRESS			2 3 STREET ADDRESS		:
CITY-ST-ZIP			2 4 CITY-ST-ZIP		53.0
TITLE		DELETE	3 1 TITLE		Change Addition
NAME			3 2 NAME		
STREET ADDRESS			3.3. STREET ADDRESS		
TITLE		DELETE	3.4 CHY-ST-ZIP		Change Addition
NAME			4 2 NAME		
STREET ADDRESS			4.3 STREET ADDRESS		
CITY-ST-ZIP			4 4 CITY - ST - ZIP		
TITLE		☐ DELETE	5 1 TITLE		Change Addition
NAME			5.2 NAME		
STREET ADDRESS			5 3 STREET ADDRESS		!
CITY-ST-ZIP			5.4 CITY-\$T-2IP		
TITLE		□ DELETE	6. 1 TITLE		☐ Change ☐ Addition
NAME			6.2 NAME		
STREET ADDRESS			6 3 STREET ADDRESS		
CITY-ST-ZIP	i ve u a di vir	On the second of the second	6 4 CITY - ST - ZIP		OT(OV(s) Florido Cara and La de
certify that oath; that I	the information indicated on this annu	ial report or supplemental an ration or the receiver or trust	nual report is true and accur ee empowered to execute the	for the exemption stated in Section 119. ate and that my signature shall have the iis report as required by Chapter 607, Flo	same legal effect as if made under

SIGNATURE: Marky A

SIGNATURE AND THEO OF PHINTED NAME OF SIGNING OFFICER OR DIRECTOR

4/12/96 (407)352 5857