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PROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT #

V19919

(2)

INTRAM INVESTMENTS, INC.

505 PARK AVE

NEW YORK NY

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STREET ADDRESS

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INTRA	M INVESTMENTS, INC.						
Principal Place of Business Mailing Address						C SERVIC BOOMER STRIP (BISE SERVE STRIP FRICE BORE)	AIDIT BIBIT BIBIT BIBIT BIBIT TARE
5401 KIRKMAN RD. STE 725 ORLANDO FL 32619 US		5401 KIRKMAN RD. STE. 725 ORLANDO FL 32819 US				DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified 02/25/1992	
2. Principal P	lace of Business	2a. Mailing Address	2a. Mailing Address			4. FEI Number	Applied For
21		26	26			59-3177943	Not Applicable
Suite, Apt.		Suite, Apt. #, etc.				5. Certificate of Status Desired	\$8.75 Additional Fee Required
City & State		City & State				6. Election Campaign Financing Trust Fund Contribution	\$5.00 May Be Added to Fees
Zip 24	Country 25	29 30			1	8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30.	
	9. Name and Address of Cui	rrent Registered Agent				10. Name and Address of New Register	ed Agent
KHATIB, RASHID A. 5401 KIRKMAN RD SUITE 725 ORLANDO FL 32819				81 82 83 84	Name Street Addr	ess (P.Ö. Box Number is Not Acceptable)	95 Zip Code
office or to agent. I a	to the provisions of Sections 607 egistered agent, or both, in the Si m familiar with, and accept the ob	0502 and 607.1508, Florida Stati tate of Florida. Such change was bligations of, Section 607.0506, F	utes, the at authorized florida Stat	oove d by ules	e-named corp the corporati	oration submits this statement for the purposion's board of directors. I hereby accept the a	of changing its registered
SIGNATURE	Signature, typed or printed name of registered	of agent and title if applicable (NO	DTE: Registered	l Age	nt signature require	DATI	
12. OFFICERS AND DIRECTORS			13.	13.		ADDITIONS/CHANGES TO OFFICERS A	ND DIRECTORS IN 12
TITLE	D	DELETE	1.1 Tr)	1.1 THILE			☐ Change ☐ Addition
NAME	KHATIB, RASHID A		1.2 NA	1.2 NAME			
STREET ADDRESS	The state of the s		1.3 ST	1.3 STREET ADDRESS			
CITY-ST-ZIP	ORLANDO FL		1.4 CII	TY-\$1	r-zip		
TITLE	D	☐ DELE TE	2.1 TiT				Change Addition
NAME	KHOURI, ZAHI W.		2.2 NA	ME			• —

2.3 STREET ADDRESS

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5.3 STREET ADDRESS

6.3 STREET ADDRESS

5.4 CITY-ST-ZIP

4.4 CITY-ST-ZIP

3.4. CITY-ST-ZIP

2.4 CITY-ST-ZIP

3.1 TITLE

3.2 NAME

4.1 TITLE

4. 2 NAME

5.1 TITLE

5.2 NAME

6.1 TITLE

6.2 NAME

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14. 1 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.

Block 12 to Block 13 in changed, or on an attachment with all address

2-28-98

(40) 2012

Change

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Addition

Addition

Change Addition

FILED

Apr 01 1998 8:00am

Secretary of State

CR2E034 (10/97)