

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

PROFIT
CORPORATION
ANNUAL REPORT
1996



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

DOCUMENT # **V41721** (4)

1. Corporation Name

EQUESTRIAN ACRES - SOUTHEAST, INC.



Principal Place of Business

Mailing Address

**C/O TAM REAL ESTATE FLORIDA, INC.
829 DONALD ROSS ROAD
JUNO BEACH FL 33408
US**

**C/O TAM REAL ESTATE FLORIDA, INC.
829 DONALD ROSS ROAD
JUNO BEACH FL 33408
US**

3. Date Incorporated or Qualified

05/20/1992

3a. Date of Last Report

03/23/1995

4. FET Number

65-0343332

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 has liability for intangible tax under s. 199.032,
Florida Statutes ☐ Yes ☐ No

2. Principal Place of Business

21

Suite, Apt. #, etc.

22

City & State

23

Zip

Country

24

25

2a. Mailing Address

26

Suite, Apt. #, etc.

27

City & State

28

Zip

Country

29

30

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

**JAMES R. KAY, P.A.
2000 PALM BCH LAKES BLVD.
STE 1002
WEST PALM BEACH FL 33409**

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 state if applicable

(NOTE: Registered Agent Signature required when re-registering)

DATE

12. OFFICERS AND DIRECTORS

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

**PDS
HASHWANI, HATIM
C/O TAM REAL ESTATE, 829 DONALD ROSS ROAD
JUNO BEACH FL 33408**

☐ DELETE

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

**VTD
AL SAYED, EBRAHIM S
C/O TAM REAL ESTATE, 829 DONALD ROSS ROAD
JUNO BEACH FL 33408**

☐ DELETE

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

**VD
CLARK, SUSAN I
C/O TAM REAL ESTATE, 829 DONALD ROSS ROAD
JUNO BEACH FL 33408**

☐ DELETE

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

**AS
JANAKI, ESAM
C/O TAM REAL ESTATE, 829 DONALD ROSS ROAD
JUNO BEACH FL 33408**

☒ DELETE

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

☐ DELETE

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

☐ DELETE

13.

1.1 TITLE
1.2 NAME
1.3 STREET ADDRESS
1.4 CITY-ST-ZIP

2.1 TITLE
2.2 NAME
2.3 STREET ADDRESS
2.4 CITY-ST-ZIP

3.1 TITLE
3.2 NAME
3.3 STREET ADDRESS
3.4 CITY-ST-ZIP

4.1 TITLE
4.2 NAME
4.3 STREET ADDRESS
4.4 CITY-ST-ZIP

5.1 TITLE
5.2 NAME
5.3 STREET ADDRESS
5.4 CITY-ST-ZIP

6.1 TITLE
6.2 NAME
6.3 STREET ADDRESS
6.4 CITY-ST-ZIP

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

☐ Change ☐ Addition

☐ Change ☐ Addition

☐ Change ☐ Addition

☐ Change ☐ Addition

☐ Change ☐ Addition

☐ Change ☐ Addition

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

HATIM HASHWANI

2/13/96

Date

407-775-7007

Daytime Phone

CR2E034 (12/95)