

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

CORPORATION
ANNUAL REPORT
1995



FLORIDA DEPARTMENT OF STATE
Mustafa B. Murrain
Secretary, Florida
CORPORATION DIVISION

APPROVED
AND
FILED

DOCUMENT # **V43015 (9)**

55 MAY - 1 AM 9:52

TARIFI & TAWIL GENERAL TRADING COMPANY

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Principal Place of Business: 11077 BISCAYNE BOULEVARD 1021 NW 95 ST. SUITE 307 MIAMI FL 33167 US **33150**
Mailing Address: 11077 BISCAYNE BOULEVARD 1021 NW 95 ST. SUITE 307 MIAMI FL 33167 US **33150**

Do not write in this space

2. Filing Period (calendar year)		2a. Mailing Address		3. Date incorporated or qualified		3a. Date of Last Report	
21		26		06/08/1992		08/30/1994	
22. Filing Agent		27. Filing Agent		4. File Number		Applied For	
23		28		65-0370656		Not Applicable	
24. City & State		29. City & State		5. Certificate of status Desired		\$8.75 Additional Fee Required	
25		29		[]		[]	
26. City & State		30. City & State		6. Election Campaign Financing Trust Fund Contribution		\$5.00 May Be Added to Fees	
27		30		[]		[]	
28. City & State		31. City & State		8. This corporation has liability for statements filed under the Florida Statutes		[] Yes [] No	
29		31		[]		[]	

9. Name and Address of Current Registered Agent				10. Name and Address of New Registered Agent			
BEGER, WILLIAM J. 807 BRICKELL AVENUE SUITE 1100 NORTH MIAMI BEACH FL 33162				B1 Name KHALID ZAYED			
				B2 Street Address (P.O. Box Number or Post Office Box)			
				B3 1021 NW 95th STREET			
				B4 City MIAMI FL B5 Zip Code 33150			

11. Pursuant to the provisions of law from time to time enacted by the Florida Statutes, this corporation submits this statement for the purpose of having my designated officer or registered agent or both in this 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 the last named officer or registered agent.

SIGNATURE: *[Signature]* **KHALID ZAYED** 4/28/95

12. OFFICERS AND DIRECTORS		13. ADDITIONAL CHANGES TO OFFICERS AND DIRECTORS (If any)	
NAME	PD ALARIJ, SOUD S 15 NE 156TH ST. N. MIAMI BEACH FL 33162	NAME	[] Change [] Addition
NAME	S ZAYED, MUSTADA 15 NE 156TH ST. N. MIAMI BEACH FL 33162	NAME	[] Change [] Addition
NAME		NAME	[] Change [] Addition
NAME		NAME	[] Change [] Addition
NAME		NAME	[] Change [] Addition
NAME		NAME	[] Change [] Addition
NAME		NAME	[] Change [] Addition
NAME		NAME	[] Change [] Addition
NAME		NAME	[] Change [] Addition
NAME		NAME	[] Change [] Addition
NAME		NAME	[] Change [] Addition

14. I, the undersigned, certify that the information supplied in this filing is true and correct to the best of my knowledge and belief, and that I am a resident of the State of Florida. I am familiar with and accept the obligations of the last named officer or registered agent.

SIGNATURE: *[Signature]* **693-8488 4/28/95**