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

PROFIT CORPORATION ANNUAL REPORT 1997



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # V60214

(6)

NAZAR INTERNATIONAL, INC.

Principal Place	of Business	Mailing Address	, ,	<u>.</u>					
6207 - F.P. BLVI FORT PIERCE FI		6207 - F.P. BLVD. FORT PIERCE FL 34951							
						3. Date Incorporated or Qualified 08/24/1992		ate of Last Re)8/1996	<u>'</u>
2. Principal Pl	ace of Business	2a. Mailing Address	├-¬ ~ ~			4. FEI Number		 	plied For
21 Cuito Ant	# sto	Suite. Apt. #. etc.				65-0356876		\$8.75 A	ot Applicable
Suite, Apt.	#, etc.	├ı '	27			5. Certificate of Status Desired		Fee Re	
City & State	3	City & State			6. Election Campaign Financing	······	\$5.00	<u>-i</u>	
23			28			Trust Fund Contribution		Added t	
Zip	Country	Zip	Country	,		8. This corporation has liability for	intangible		
24	25	29	30					No	
	9. Name and Address of Curre	ent Registered Agent				10. Name and Address of New R	egistered	Agent	
HUSS	SAIN, ASLAM M		81	Nam	e				
6207 - F.P. BLVD.				Stree	t Addre	ess (P.O. Box Number is Not Accepta	ble)		
FORT	PIERCE FL 34951						 		
			83						
			84	City				85 Zip (Code
				<u> </u>		pration submits this statement for the	FL	-	
SIGNATURE	of familiar with, and accept the obli- Signature, typed or prived name of organized in				ure require	d when reinstating) ADDITIONS/CHANGES TO OFF	DATE	D DIRECTOR	S IN 12
12.	P	DELETE	1.1 TITLE		1	ADDITIONS/CHANGES TO OH	OLINO AN	Change	Addition
TITLE NAME	HUSSAIN, ASLAM M	C been	1.2 NAME		1				
STREET ADDRESS	6207 - F.P. BLVD.		1.3 STREE	I ADDRESS					
CITY-ST-7iP	FORT PIERCE FL 34951		1.5 STOLE.		<u> </u>				
TITLE	V	DELETE	2 1 TITLE	31-211				☐ Change	Addition
NAME	HUSSAIN, UZMA D		22 NAME						
STREET ADDRESS	6207 • F.P. BLVD.		23 STREE	T ADDRESS	s			•	
CITY-S1-ZIP	FORT PIERCE FL 34951		2 4 CITY-ST-ZIP						
TITLE		DELETE	3 1 TITLE					☐ Change	Addition
NAME			3 2 NAME						
STREET ADDRESS			3.3 STREE	T ADDRES	S				
CITY - \$1 - 20P			34 CITY-	ST-ZIP					1
TITLE		L DELETE	4 1 TITLE					Change	Addition
NAME			4. 2 NAME						
STREET ADDRESS			4.3 STREE		S				
CITY - ST - ZIP		DELETE	4.4 CITY -	ST-ZIP	-			Change	Addition
TOTLE		₩ DEFEIG	5.1 HILE					☐ ∆uguge	riduition
NAME expect appears			5 2 NAME 5 3 STREE	r arindeo					
STREET ADDRESS T			5.4 CITY-		`				
TITLE		DELETE	5.4 CHY-	OI · EIF	 		-,	☐ Change	Addition
NAME		-	6.2 NAME					-	
STREET ADDRESS			6.3 STREE		s				
CITY-ST-ZIP			6.4 CITY -						
14. Ldo here	by certify that the information suppl	ed with this filing does not quali	fy for the ex-	emption	stated	in Section 119.07(3)(i), Florida Statu	les. I furthe	ar certify that	the
informatic Lam an c appears	on indicated on this annual report of thiser or director if the corporation in Block 12 or Book 13 it changed,	r supplemental annual report is to or the receiver or trustee empow or on an altachment with an add	rue and acc vered to exe dress.	urate a cute thi	no that s report	my signature shall have the same let t as required by Chapter 607, Florida	Statutes;	and that my	name

SIGNATURE:

0526946

FILED

Jan 16 1997 8:00am

Secretary of State