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

PROFIT CORPORATION ANNUAL REPORT 1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # V709

(6)

IMAN, INC.

Principal Place	e of Business	Mailing Address		1 10011 011011 10011 00110 10101 01101	1811 glass giðir 61641 61641 árðir glass 1861
9700 KOGER	BLVD N	9700 KOGER BLVD N		1	
307 et petebeni	UDA EL 99303	307 et petenenung et same	•	DO NOT WRIT	TE IN THIS SPACE
ST PETERSBURG FL 33702 ST PETERSBURG FL 3370			4	3. Date Incorporated or Qualified	
"		••		10/12/1992	
2. Principal P	lace of Business	2a, Mailing Address		4, FEI Number	Applied For
21 3118 G	LULE TO BAY BLUD	28 3118 GULFT	TO BAY BIV.	D 59-3146337	Not Applicable
Suite, Apt.		Suite, Apt. #, etc.		5, Certificate of Status Desired	\$8.75 Additional
22 324		27 524-		6. Certificate of Status Desired	Fee Required
City & State		City & State		6, Election Campaign Financing	\$5.00 May Be
	RWATER FL	28 CLEARWATE		Trust Fund Contribution	Added to Fees
	57.57 Country	Zφ	Country	8. This corporation owes or has p	— ' — '
24	9 Name and Address of Current		OUSA	Personal Property Tax due Jur 10 Name and Address of New F	
- no		Holietaten wäett	81 Name		ioRistorah Wholir
IBRAH					
	RPON SPRINGS FL 34889			dress (P.O. Box Number is Not Accepta	
'A'	MPOR SPRINGS PL 34008		3118 83	GULF TO BAY B	1LVD - 324
			84 54 15	10.0 (. IATTE	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	MIN D				122198
	Platur Typed or printed narrier of registered agent		Registered Agent signature re		DATE
12.	PTD	DELETE	13.	ADDITIONS/CHANGES TO OFF	Change Addition
NAME	KHADER, IBRAHIM		1		— • —
STREET ADDRESS	9700 KOGER BLVD N SUITE 3	07	1.3 STREET ADDRESS	RUSGINE TO BAY	/ BWO #324
CITY-ST-ZIP	ST PETERSBURG FL	•	1.4 CITY - ST - ZIP	BIIS GULF TO BAY	マスフミタ
TITLE	VSD	DELETE	2.1 TITLE	- TOWN IS COME	Change Addition
NAME	KHADER, AYMEN	_ _ -··	2.2 NAME		_ • _
STREET ADDRESS	9700 KOGER BLVD N SUITE 3	07	2.3 STREET ADDRESS		
CITY-ST-ZIP	ST PETERSBURG FL	- -	2.4 CiTY-ST-ZIP		
TITLE	AT	DELETE	3.1 TITLE		Change Addition
NAME	HMEIDAN, NAEL		3.2 NAME		<u>-</u>
STREET ADORESS	9700 KOGER BLVD N SUITE 3	07	3.3 STREET ADDRESS		
CITY-ST-ZIP	ST PETERSBURG FL		3.4. CITY-ST-ZIP		
TOTLE		DELETE	4.1 TITLE		Change Addition
HAME			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-St-ZiP		
TITLE		DELETE	6.1 TITLE		Change Addition

14. I 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.

64 CITY-ST-ZIP

6.2 NAME 6.3 STREET ADDRESS

SIGNATURE:

STREET ADDRESS

fre &

4/22/98 813 724-8292

FILED

Apr 29 1998 8:00am

Secretary of State