

ORIGINAL COPY

910454- TC

SENDER: Complete items 1 and 2 when additional services are desired, and complete items 3 and 4.
Put your address in the "RETURN TO" Space on the reverse side. Failure to do this will prevent this card from being returned to you. The return receipt fee will provide you the name of the person delivered to and the date of delivery. For additional fees the following services are available. Consult postmaster for fees and check box(es) for additional service(s) requested.

1. Show to whom delivered, date, and addressee's address. 2. Restricted Delivery (Extra charge)

3. Article Addressed to:
**DAMMAM INTERNATIONAL CORP.
ATTN: VAHID ABADIAN
6500 N.W. 12th AVE., STE# 118
FT. LAUDERDALE, FL. 33309-1148**

4. Article Number
78941

Type of Service:
 Registered Insured
 Certified COD
 Express Mail Return Receipt for Merchandise

Always obtain signature of addressee agent and **DATE DELIVERED.**

5. Signature - Addressee
[Signature]

6. Signature - Agent
[Signature]

7. Date of Delivery
5/16/91

8. Addressee's Address (ONLY if requested and fee paid)

FL 322 1661 JACSONVILLE 17 MAY 1991 PM

PS Form 3811, Apr. 1989 • U.S.G.P.O. 1989-219-817 DOMESTIC RETURN RECEIPT

- AFA _____
- APP _____
- CAF _____
- CMU _____
- CTR _____
- EAG _____
- LEG _____
- LIN _____
- OPC _____
- RCH _____
- SEC
- WAS _____
- OTH _____

DOCUMENT NUMBER-DATE

05030 MAY 20 1991

TC-RECORDS/REPORTING