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05-02-2003 90708 013 ***150.00

**2003 FOR PROFIT CORPORATION
 UNIFORM BUSINESS REPORT (UBR)**

DOCUMENT # P93000041689

1. Entity Name
LALANI CORPORATION

Principal Place of Business
 2960 TAFT STREET
 HOLLYWOOD, FL 33020

Mailing Address
 820 N.E. 128TH STREET
 NORTH MIAMI, FL 33161

2. Principal Place of Business
 Suite, Apt. #, etc.

3. Mailing Address
2960 TAFT ST
 Suite, Apt. #, etc.

City & State
HOLLYWOOD

Zip
FL 33020

Country
FL 33020

4. FEI Number
65-0433803

Applied For
 Not Applicable

5. Certificate of Status Desired
 \$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent
LALANI, ANWARALI
2960 TAFT ST
820 N.E. 128TH ST
NORTH MIAMI, FL 33161

7. Name and Address of New Registered Agent
 Name
 Street Address (P.O. Box Number is Not Acceptable)
 City
FL Zip Code

8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. I am furnished with, and accept the obligations of registered agent.

SIGNATURE _____ DATE _____

9. Election Campaign Financing
 Trust Fund Contribution \$5.00 May Be Added to Fees

10. OFFICERS AND DIRECTORS

TITLE	NAME	STREET ADDRESS	CITY-ST-ZIP	Change	Addition
PO	LALANI, ANWARALI	820 N.E. 128TH ST 2960 TAFT ST	N. MIAMI BEACH, FL 33161 HOLLYWOOD, FL 33020	<input type="checkbox"/>	<input type="checkbox"/>
TSD	LALANI, CARMENCITA O	820 N.E. 128TH ST 2960 TAFT ST	N. MIAMI BEACH, FL 33161 HOLLYWOOD, FL 33020	<input type="checkbox"/>	<input type="checkbox"/>
VD	LALANI, MEHDI H	820 N.E. 128TH ST 2960 TAFT ST	N. MIAMI BEACH, FL 33161 HOLLYWOOD, FL 33020	<input type="checkbox"/>	<input type="checkbox"/>
				<input type="checkbox"/>	<input type="checkbox"/>
				<input type="checkbox"/>	<input type="checkbox"/>
				<input type="checkbox"/>	<input type="checkbox"/>

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE	NAME	STREET ADDRESS	CITY-ST-ZIP	Change	Addition
				<input type="checkbox"/>	<input type="checkbox"/>
				<input type="checkbox"/>	<input type="checkbox"/>
				<input type="checkbox"/>	<input type="checkbox"/>

12. 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 report or supplemental 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: *Anwarali Lalani* **ANWARALI LALANI** **954-926-6752**

SIGNATURE AND TYPED OR PRINTED NAME OF INCORPORATING OFFICER OR DIRECTOR

55046041



CHECK HERE IF MAKING CHANGES

05-02-2003 (10/02)