2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# L37949

Entity Name: NORTH 786 INC.

Current Principal Place of Rusiness:

FILED Apr 30, 2004 Secretary of State

New Principal Place of Rusiness

Name and Address of Current Registered Agent:	Name and Address of New Registered Agent:
FEI Number: 65-0174995 FEI Number Applied For ()	FEI Number Not Applicable () Certificate of Status Desired (
975 SW 24 ST SR 84 FT LAUDERDALE, FL 33012 US	
Current Mailing Address:	New Mailing Address:
975 SW 24TH ST STATE RD 84 FT LAUDERDALE, FL 33012 US	
Outlett intripart face of business.	New Fillicipal Flace of Dusiliess.

KARIN, MOHAMMED H. KARIM, MOHAMMED H.

3001 BOGOTA AVE 13822 NW 11TH COURT COOPER CITY, FL 33026 US PEMBROKE PINES, FL 330282352 US

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.

SIGNATURE: MOHAMMED KARIM 04/30/2004

Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Delete Title: (X) Change () Addition KARIN, MOHAMMED H., KARIM, MOHAMMED H OFFICER Name: Name: 3001 BOGODA AVE. Address: 13822 NW 11TH COURT Address: City-St-Zip: COOPER CITY, FL 33026 City-St-Zip: PEMBROKE PINES, FL 330282352 US Title: () Delete Title: () Change (X) Addition KARIM, SUMAIRA OFFICER Name: Name: Address: 13822 NW 11TH COURT Address: PEMBROKE PINES, FL 330282352 US City-St-Zip: City-St-Zip: Title: Title: () Delete () Change (X) Addition Name: KARIM, SARA OFFICER Name: 13822 NW 11TH COURT Address Address: City-St-Zip: City-St-Zip: PEMBROKE PINES, FL 330282352 US Title: () Delete Title: VΡ () Change (X) Addition KARIM, SABRINA OFFICER Name: Name: Address: Address: 13822 NW 11TH COURT City-St-Zip: City-St-Zip: PEMBROKE PINES, FL 330282352 US Title: Title: () Change (X) Addition () Delete KARIM, NAFISA OFFICER Name: Name: Address: Address: 13822 NW 11TH COURT PEMBROKE PINES, FL 330282352 US City-St-Zip: City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the 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 electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: MOHAMMED KARIM P 04/30/2004