

FILED
Jul 24, 2003 8:00 am
Secretary of State

07-24-2003 90110 019 ***150.00

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

DOCUMENT # V61545

1. Entity Name
AK CORPORATION



Principal Place of Business
11401 PINES BLVD
#900
PEMBROKE PINES, FL 33026 US

Mailing Address
20109 NW 62CT
MIAMI, FL 33015 US

30146089

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number
65-0354477

Applied For
Not Applicable

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

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

KAJANI, AMIN
20109 NW 62CT
MIAMI, FL 33015

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 familiar with, and accept the obligations of registered agent.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent's signature required when reinstating)

DATE

FILE NOW!!! FEE IS \$150.00

After May 1, 2003 Fee will be \$550.00

Amended UBR is \$61.25

Make Check Payable to Florida Department of State

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be Added to Fees

10. OFFICERS AND DIRECTORS

TITLE ☐ Delete
NAME **D**
STREET ADDRESS **KAJANI, AMIN**
CITY-ST-ZIP **20109 NW 62CT**
MIAMI, FL

TITLE ☐ Delete
NAME **S**
STREET ADDRESS **KAJANI, AL-ANIS H**
CITY-ST-ZIP **20109 N.W. 62ND COURT**
MIAMI, FL 33015

TITLE ☐ Delete
NAME **V**
STREET ADDRESS **KAJANI, AJAZ H**
CITY-ST-ZIP **20109 NW 62ND CT**
MIAMI, FL 33015

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
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CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

7/22/03

CH2E034 (10/02)

Attachment

V61545

90146089

07 July 2003
Department of State
Division of Tallahassee
Miami, FL

Re: UBR Form for the year 2003
Responding Entity: AK Corporation
Document #V61545
FEI # 65-0354477

Dear Sir or Madam:

This is to inform you that I never received a UBR Form for the year 2003. I recently found out that my corporation has been dissolved. Enclosed please find a check of \$150 (2003 renewal fee) and a blank UBR Form printed from the internet.

Thank you for your assistance in this matter.

Yours truly,
Kajani Amin

