

**2017 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N93000004461

**Entity Name:** AL-HIKMAT SERVICES, INC.**Current Principal Place of Business:**2205 SW 62ND TERR.  
MIRAMAR, FL 33023**Current Mailing Address:**2205 SW 62ND TERR.  
MIRAMAR, FL 33023 US**FEI Number:** 65-0417222**Certificate of Status Desired:** Yes**Name and Address of Current Registered Agent:**SHAFAYAT, MOHAMED  
2205 SW 62ND TERR.  
MIRAMAR, FL 33023 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:**\_\_\_\_\_  
Electronic Signature of Registered Agent\_\_\_\_\_  
Date**Officer/Director Detail :**

Title	PD
Name	MOHAMED, SHAFAYAT
Address	PO BOX 6277 N/A
City-State-Zip:	HOLLYWOOD FL 33081

Title	SD
Name	MOHAMED, SHAHINAAZ
Address	PO BOX 6277 N/A
City-State-Zip:	HOLLYWOOD FL 33081

Title	VD
Name	DEEN, MEER
Address	4269 SW 50TH STREET
City-State-Zip:	FT. LAUDERDALE FL 33314

Title	TD
Name	DEEN, SALIMA
Address	4269 SW 50TH STREET
City-State-Zip:	FT. LAUDERDALE FL 33314

Title	D
Name	MOHAMED, NIAMATH
Address	2205 SW 62ND TERRACE
City-State-Zip:	MIRAMAR FL 33023

Title	D
Name	MOHAMED, KHIZR
Address	2205 SW 62ND TERRACE
City-State-Zip:	MIRAMAR FL 33023

*I hereby 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 617, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.*

**SIGNATURE:** SHAFAYAT MOHAMED**PRESIDENT****04/09/2017**\_\_\_\_\_  
Electronic Signature of Signing Officer/Director Detail\_\_\_\_\_  
Date