

**2024 FLORIDA PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P05000075339

**Entity Name:** HMSHAKIL CORP, INC

**Current Principal Place of Business:**

20504 NE 9TH CT  
MIAMI, FL 33179

**FILED**  
**Apr 18, 2024**  
**Secretary of State**  
**3247520446CC**

**Current Mailing Address:**

11195 SW 206 STREET  
MIAMI, FL 33170 US

**FEI Number: 20-2883489**

**Certificate of Status Desired: No**

**Name and Address of Current Registered Agent:**

NOOR, LAILA  
3101 WEST SUNRISE BLVD  
FORT LAUDERDALE, FL 33311 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           VPSD  
Name           NOOR, LAILA  
Address        3101 WEST SUNRISE BLVD  
City-State-Zip: FORT LAUDERDALE FL 33311

Title           PD  
Name           HOSSAIN, MOHAMMED  
Address        11195 SW 206 STREET  
City-State-Zip: MIAMI FL 33170

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

**SIGNATURE: LAILA NOOR**

**MRS.**

**04/18/2024**

Electronic Signature of Signing Officer/Director Detail

Date