

**2015 FLORIDA PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P93000041623

**Entity Name:** ZULEKHA, INC.

**Current Principal Place of Business:**

6251 N POWERLINE RD  
FT LAUDERDALE, FL 33309

**Current Mailing Address:**

5796 NW 48TH DR  
CORAL SPRINGS, FL 33067 US

**FEI Number:** 65-0423196

**Certificate of Status Desired:** No

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

MAJID, SHAFI  
5796 NW 48TH DR  
CORAL SPRINGS, FL 33067-4015 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           DPT  
Name           MAJID, AFZAL  
Address        5796 NW 48TH DR  
City-State-Zip: CORAL SPRINGS FL 33067-4015

Title           DVS  
Name           MAJID, SHAFI  
Address        5796 NW 48TH DR  
City-State-Zip: CORAL SPRINGS FL 33067-4015

Title           DV  
Name           MAJID, RUKSHANA S  
Address        5796 NW 48TH DR  
City-State-Zip: CORAL SPRINGS FL 33067-4015

Title           DV  
Name           MAJID, RAZIA A  
Address        5796 NW 48TH DR  
City-State-Zip: CORAL SPRINGS FL 33067-4015

*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:** SHAFI MAJID

**DVS**

**04/10/2015**

Electronic Signature of Signing Officer/Director Detail

Date