2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# K82240

Entity Name: AL RIAZ, INC.

FILED Apr 10, 2005 Secretary of State

Current Principal Place of Business:			New Principal Plac	New Principal Place of Business:	
DBA CARV 8343 W FL MIAMI, FL	AGER ST				
Current Mailing Address:			New Mailing Addre	New Mailing Address:	
DBA CARV 8343 W FL MIAMI, FL	AGLER ST				
FEI Number:	65-0116192	FEI Number Applied For ()	FEI Number Not Applicable ()	Certificate of Status Desired ()	
Name and Address of Current Registered Agent: Name and Address of New Registered Agent:					
RIAZ, TARI 10420 S.W MIAMI, FL	. 48TH STREE	Т			
The above in the State		ubmits this statement for the pur	pose of changing its register	red office or registered agent, or both,	
SIGNATUR	RE:				
	Electronic	Signature of Registered Agent		Date	
Election Carr	paign Financing	Trust Fund Contribution ().			
OFFICERS AND DIRECTORS:			ADDITIONS/CHAN	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:	
Title: Name: Address: City-St-Zip:	P () [RIAZ, TARIQ, 10420 S.W. 48TH MIAMI, FL	Delete	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	TS () [RIAZ, KHALID, 10470 SW 47 ST MIAMI, FL	Delete	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	V ()[AKHTER, PERVE 11969 SW 72 TE MIAMI, FL		Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	V ()[RIAZ, RASHID, 10751 SW 44TH MIAMI, FL		Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	V () [RIAZ, ZAKIR, 5020 SW 103 PL MIAMI, FL	Delete	Title: Name: Address: City-St-Zip:	() Change () Addition	

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: ZAKIR RIAZ V 04/10/2005