

FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

CORPORATION
ANNUAL REPORT
1995



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS

95 APR -4 PM 11:59

DOCUMENT # L05801

(0)

1. Corporation Name

SIDIKI, INC.

Principal Place of Business

845 EAST 49TH STREET
HALEAH FL 33013

Mailing Address

845 EAST 49TH STREET
HALEAH FL 33013

DO NOT WRITE IN THIS SPACE.

3. Date Incorporated or Qualified

08/01/1989

3a. Date of Last Report

10/28/1994

2. Principal Place of Business

21

Suite, Apt. #, etc.

City & State

23

Zip

Country

24

2a. Mailing Address

26

Suite, Apt. #, etc.

City & State

27

City & State

28

Zip

Country

29

Zip

Country

30

4. FBI Number

65-0226615

Applied For

Not Applicable

5. Certificate of Status Desired

☐

\$8.75 Additional
Fee Required

6. Election Campaign Financing

☐

\$5.00 May Be
Added to Fees

8. This corporation has liability for intangible tax under S. 199.032,
Florida Statutes

☐ Yes

☐ No

9. Name and Address of Current Registered Agent

AKBAR, JUNAID
845 E. 49 STREET
HALEAH FL 33013

10. Name and Address of New Registered Agent

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)

83

84 City

FL

85 Zip Code

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE

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

(NOTE: Registered Agent signature required when re-registering)

DATE

12. OFFICERS AND DIRECTORS

TITLE

NAME

STREET ADDRESS

CITY - ST - ZIP

P

SIDIQUI, ATHAR
845 EAST 49TH STREET
HALEAH FL

TITLE

NAME

STREET ADDRESS

CITY - ST - ZIP

V

AKBAR, JUNAID
845 EAST 49TH STREET
HALEAH FL 33013

TITLE

NAME

STREET ADDRESS

CITY - ST - ZIP

S

MANZER, MASOOD
9380 FOUNTAINBLEU BLVD. #405
MIAMI FL 33172

TITLE

NAME

STREET ADDRESS

CITY - ST - ZIP

V

SADIO, KHALID
9310 FOUNTAINBLEU BLVD. #601
MIAMI FL 33172

TITLE

NAME

STREET ADDRESS

CITY - ST - ZIP

V

MAHMOOD, KHALID
9380 FOUNTAINBLEU BLVD. #502
MIAMI FL 33172

TITLE

NAME

STREET ADDRESS

CITY - ST - ZIP

V

AZCHAR, NIGHAT
845 E. 49TH ST
HALEAH FL 33013

13.

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE

1.2 NAME

1.3 STREET ADDRESS

1.4 CITY - ST - ZIP

☐ Change

☐ Addition

2.1 TITLE

2.2 NAME

2.3 STREET ADDRESS

2.4 CITY - ST - ZIP

☐ Change

☐ Addition

3.1 TITLE

3.2 NAME

3.3 STREET ADDRESS

3.4 CITY - ST - ZIP

☒ Change

☐ Addition

4.1 TITLE

4.2 NAME

4.3 STREET ADDRESS

4.4 CITY - ST - ZIP

☐ Change

☐ Addition

5.1 TITLE

5.2 NAME

5.3 STREET ADDRESS

5.4 CITY - ST - ZIP

☐ Change

☐ Addition

6.1 TITLE

6.2 NAME

6.3 STREET ADDRESS

6.4 CITY - ST - ZIP

☐ Change

☐ Addition

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 110.07(3)(b), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual 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 12 or Block 13 (if changed), or on an attachment with an address.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF REGISTERED AGENT OR DIRECTOR

3/29/95

DATE

(305) 825-2354