

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

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AND  
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1995

MAY 10 AM 10:35

**DOCUMENT # M38194**

**(0)**

**SECRETARY OF STATE  
TALLAHASSEE, FLORIDA**

**PAK-AMERICAN ENTERPRISES, INC.**

**C/O SYED SHAFAT ALI BOKHARI  
1750 W. 46 ST. #419  
HIALEAH FL 33012**

**C/O SYED SHAFAT ALI BOKHARI  
1750 W. 46 ST. #419  
HIALEAH FL 33012**

**BOKHARI**

2. Filing Date: <b>09/08/1986</b>		3a. Filing Date of Last Report: <b>05/01/1984</b>	
21. Filing Office: <b>65-0010047</b>		3b. Filing Office: <b>65-0010047</b>	
22. Filing Fee: <b>\$8.75 Additional Fee Required</b>		4. Filing Fee: <b>\$8.75 Additional Fee Required</b>	
23. Filing Fee: <b>\$5.00 May Be Added to Fees</b>		5. Filing Fee: <b>\$5.00 May Be Added to Fees</b>	
24. Filing Fee: <b>\$5.00 May Be Added to Fees</b>		6. Filing Fee: <b>\$5.00 May Be Added to Fees</b>	

**9. Name and Address of Current Registered Agent**

**ALI BOKHARI, SYED SHAFAT  
1750 W. 46 ST.  
#419  
HIALEAH FL 33012**

**10. Name and Address of New Registered Agent**

81. Name:	
82. Street Address (Not for Numbered Street):	
83. City:	
84. State:	<b>FL</b>
85. Zip Code:	

11. The undersigned, the president of the corporation, and the undersigned Florida Statutes, the undersigned, hereby certifies the statement for the purpose of changing its registered office as provided in section 607.0115, Florida Statutes, and the undersigned hereby certifies that the corporation is in good standing under the laws of the State of Florida and that the corporation is in good standing under the laws of the State of Florida.

SIGNATURE:

12. OFFICERS AND DIRECTORS	13. ADDITIONAL CHANGES TO OFFICERS AND DIRECTORS
<p><b>D</b> <b>BUKHARI, ZAHID AHMED</b> <b>19710 N.W. 39 COURT</b> <b>MIAMI FL</b></p>	<p><input type="checkbox"/> Change <input type="checkbox"/> Address</p>
<p><b>PO</b> <b>ALI BOKHARI, SYED SHAFAT</b> <b>1750 W. 46 ST. #419</b> <b>HIALEAH FL</b></p>	<p><input type="checkbox"/> Change <input type="checkbox"/> Address</p>
<p><b>D</b> <b>BUKHARI, NASIR AHMED</b> <b>19710 N.W. 39 CT.</b> <b>MIAMI FL</b></p>	<p><input type="checkbox"/> Change <input type="checkbox"/> Address</p>
<p><b>D</b> <b>BOKHARI, FEROUZA</b> <b>1750 W. 46 ST. #419</b> <b>HIALEAH FL</b></p>	<p><input type="checkbox"/> Change <input type="checkbox"/> Address</p>
<p><b>D</b> <b>BOKHARI, FEROUZA</b> <b>1750 W. 46 ST. #419</b> <b>HIALEAH FL</b></p>	<p><input type="checkbox"/> Change <input type="checkbox"/> Address</p>

14. I, the undersigned, certify that the information supplied with this filing is true, correct, and complete, and that I am qualified to file this report as stated in section 607.0115, Florida Statutes. I further certify that the information is true, correct, and complete, and that I am qualified to file this report as stated in section 607.0115, Florida Statutes. I further certify that the information is true, correct, and complete, and that I am qualified to file this report as stated in section 607.0115, Florida Statutes.

**SIGNATURE:**

*[Handwritten Signature]*  
SIGNATURE OF TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

5/5/95 (305) 558-6196