2012 NOT-FOR-PROFIT CORPORATION AMENDED ANNUAL REPORT

FILED
Jul 04, 2012
Secretary of State

DOCUMENT# N01000002562

Entity Name: CAIR FLORIDA, INC.

Current Principal Place of Business:

1601 NORTH PALM AVE
203
PEMBROKE PINES, FL 33026 UN

New Principal Place of Business:

Current Mailing Address:

1601 NORTH PALM AVE
203
PEMBROKE PINES, FL 33026

New Mailing Address:

FEI Number: 65-1110616 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

ABDUR-RAHMAN, ZAID
1601 N PALM AVE
203
PEMBROKE PINES, FL 33026 US

Name and Address of New Registered Agent:

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

OFFICERS AND DIRECTORS:

Title: D
Name: GHABOUR, MOHAMED
Address: 3405 SYLVAN SHADOW ST.
City-St-Zip: VALRICO, FL 33594

Title: D
Name: RAZA, ALI
Address: 405 IRIS ST
City-St-Zip: CELEBRATION, FL 34747

Title: D
Name: MANZOOR, HUSSAIM
Address: 1601 N PALM AVE, STE 203
City-St-Zip: PEMBROKE PINES, FL 33026

Title: D
Name: LOUAY, BAYYAT
Address: 1601 N PALM AVE, STE 203
City-St-Zip: PEMBROKE PINES, FL 33026

Title: D
Name: ABDUR-RAHMAN, ZAID
Address: 1601 N PALM AVE, STE 203
City-St-Zip: PEMBROKE PINES, FL 33026

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

SIGNATURE: ZAID ABDURRAHMAN D 07/04/2012

Electronic Signature of Signing Officer or Director Date