

01-03 FOR PROFIT CORPORATION
UNIFORM BUSINESS REPORT (UBR)

FILED

03 JUN -4 AM 11:27

SECRETARY OF STATE
TALLAHASSEE FLORIDA

DOCUMENT # P00000052258

1. Entity Name

ALISHA ENTERPRISES INC



DO NOT WRITE IN THIS SPACE

2. Principal Place of Business

18901 N HWY 52

Suite, Apt. #, etc.

3. Mailing Address

12202 WINDRIVER LANE # 5

Suite, Apt. #, etc.

5

City & State

LAND O LAKES, FL

City & State

HUDSON, FL 34667

Zip

Country

34639

Zip

Country

34667

4. FEI Number

59-3652206

Applied For

Not Applicable

5. Certificate of Status Desired



\$8.75 Additional
Fee Required

DO NOT WRITE IN THIS SPACE

DO NOT WRITE
IN THIS SPACE

7. Name and Address of Current Registered Agent

Name

CHANDRANI, SULEMAN

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

12202 WINDRIVER LANE # 5

City

HUDSON

FL

Zip Code

34667

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

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

(NOTE: Registered Agent signature required when reinstating)

04/28/03
DATE

January 1 - May 1 Fee is \$150.00

After May 1, Fee is \$550.00

Amended UBR is \$61.25

Make Check Payable to Florida Department of State

9. Election Campaign Financing
Trust Fund Contribution.



\$5.00 May Be
Added to Fees

10. OFFICERS AND DIRECTORS

TITLE NAME STREET ADDRESS CITY-ST-ZIP	P SHAHBUDDIN, SIKANDER 12280 W SAMPLE RD CORAL SPRINGS, FL 33065	TITLE NAME STREET ADDRESS CITY-ST-ZIP	500020541825 06/05/03--01049--004 **308.75
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VP/S/T CHANDRANI, SULEMAN 12202 WINDRIVER LANE HUDSON, FL 34667	TITLE NAME STREET ADDRESS CITY-ST-ZIP	500020541825 06/05/03--01049--005 **323.75
TITLE NAME STREET ADDRESS CITY-ST-ZIP		TITLE NAME STREET ADDRESS CITY-ST-ZIP	DO NOT WRITE IN THIS SPACE
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12. I hereby certify that the information supplied with this filing does not qualify 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 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 10 or on an attachment with an address, with all other like empowered.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

04/28/03
Date

Daytime Phone #

CR2E034B (12/02)

attachment

P0000052258

ALISHA ENTERPRISES INC
12202 WINDRIVER LANE # 5
HUDSON, FL 34667

FLORIDA DEPARTMENT OF STATE
DIVISION OF CORPORATIONS
409 EAST GAINES STREET
TALLAHASSEE, FL 32399

DOC # P0000052258
UBR 2003

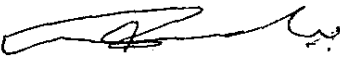
In the year 2002 we mailed you the check and form UBR 2002. After wards we had a lot of problems with mail delivery. We missed lot of bank statements and much other mail, so we closed our bank account and changed our mailing address for security reasons. We came to know only now, that our corporation was dissolved administratively for nonpayment of annual fee. This was happened as we closed the bank account .We believe that we lost your subsequent correspondence also, along with other mail. We could not respond, as we have not received your correspondence due to change of address. Please excuse us for this time. We request you not to charge any penalty, as we did file our UBT 2002 and other things happened unintentionally and beyond our knowledge.

We enclose a check of \$300.00 for the year 2002 and 2003.

\$75 for Carl's rate

We request you to reinstate our corporation immediately otherwise we will be put into lot of problems from others like banks, lotto, money order companies etc.

Thank you, for your cooperation.


Suleman Chandrani
Vice President/Secretary
April 28, 2003