



# 2005 FOR PROFIT CORPORATION ANNUAL REPORT

**FILED**  
**May 02, 2005 08:00 AM**  
**Secretary of State**

<b>DOCUMENT # P00000074000</b> 1. Entity Name <b>MONOWARA KABIR CORPORATION</b>				
Principal Place of Business <b>2300 SW 4TH AVENUE FORT LAUDERDALE, FL 33315</b>		Mailing Address <b>2300 SW 4TH AVENUE FORT LAUDERDALE, FL 33315</b>		
<b>DO NOT WRITE IN THIS SPACE</b>		 04272005 No Chg-P CR2E034 (10/03)		
4. FEI Number <b>65-1038140</b>		Applied For <input checked="" type="checkbox"/> Not Applicable		
5. Certificate of Status Desired <input type="checkbox"/>		<b>\$8.75</b> Additional Fee Required		
6. Name and Address of Current Registered Agent  <b>REZA, DALIM 2300 SW 4TH AVENUE FORT LAUDERDALE, FL 33315</b>		<b>DO NOT WRITE IN THIS SPACE</b>		
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 _____ <small>Signature, typed or printed name of registered agent and if applicable (NOTE: Registered Agent signature required when reinstating) DATE</small>				
<b>FILE NOW!!! FEE IS \$150.00 After May 1, 2005 Fee will be \$550.00</b>		9. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/> <b>\$5.00</b> May Be Added to Fees		
<b>10. OFFICERS AND DIRECTORS</b>		U000000357318 05/04/05-80070-002 150.00  <b>DO NOT WRITE IN THIS SPACE</b>		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>P REZA, DALIM 2300 SW 4TH AVE FORT LAUDERDALE, FL 33315</b>			
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>S HOSSAIN, MOHAMMED N 750 NE 64TH STREET #PH B-7 MIAMI, FL 33128</b>			
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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 Block 11 if changed, or on an attachment with an address, with all other like empowered.				
<b>SIGNATURE:</b> <u><i>Dalim Reza</i></u> <small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR</small>		<u>04/20/2005</u> <small>Date Daytime Phone #</small>		