

2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P01000020941

Entity Name: SUHAM CORPORATION

FILED
Mar 05, 2005
Secretary of State

Current Principal Place of Business:

1840 N.W. 72ND WAY
PEMBROKE PINES, FL 33024

New Principal Place of Business:

Current Mailing Address:

P.O. BOX 841454
PEMBROKE PINES, FL 33084

New Mailing Address:

FEI Number: 65-1078702

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

GATTAS ASFURA, BISHARA M
1840 N.W. 72ND WAY
PEMBROKE PINES, FL 33084 US

Name and Address of New Registered Agent:

GATTAS ASFURA, BISHARA M
1840 N.W. 72ND WAY
PEMBROKE PINES, FL 33024 US

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

03/05/2005

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: PD () Delete
Name: GATTAS ASFURA, ANTONIO M
Address: 1840 N.W. 72ND WAY
City-St-Zip: PEMBROKE PINES, FL 33024

Title: SD () Delete
Name: GATTAS ASFURA, BISHARA M
Address: 1840 N.W. 72ND WAY
City-St-Zip: PEMBROKE PINES, FL 33024

Title: TD () Delete
Name: GATTAS ASFURA, KERIM M
Address: 1840 N.W. 72ND WAY
City-St-Zip: PEMBROKE PINES, FL 33024

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the 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 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 607, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: BISHARA M. GATTAS ASFURA

Electronic Signature of Signing Officer or Director

SD

03/05/2005

Date