

# 2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P01000020941

Entity Name: SUHAM CORPORATION

FILED  
Feb 28, 2007  
Secretary of State

**Current Principal Place of Business:**

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

**New Principal Place of Business:**

2755 SW 82ND AVE  
MIRAMAR, FL 33025

**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 33024      US

**Name and Address of New Registered Agent:**

GATTAS ASFURA, BISHARA M  
2755 SW 82ND AVE  
MIRAMAR, FL 33025      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: \_\_\_\_\_ 02/28/2007  
Electronic Signature of Registered Agent      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: PD (X) Change ( ) Addition  
Name: GATTAS ASFURA, ANTONIO M  
Address: P.O. BOX 841454  
City-St-Zip: PEMBROKE PINES, FL 33084

Title: SD (X) Change ( ) Addition  
Name: GATTAS ASFURA, BISHARA M  
Address: P.O. BOX 841454  
City-St-Zip: PEMBROKE PINES, FL 33084

Title: TD (X) Change ( ) Addition  
Name: GATTAS ASFURA, KERIM M  
Address: P.O. BOX 841454  
City-St-Zip: PEMBROKE PINES, FL 33084

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Chapter 119, 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: KERIM GATTAS      TD      02/28/2007  
Electronic Signature of Signing Officer or Director      Date