

2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P01000036590

Entity Name: MIKE AND AL, INC.

FILED
Apr 29, 2008
Secretary of State

Current Principal Place of Business:

6775 STIRLING ROAD
DAVIE, FL 33314

New Principal Place of Business:

Current Mailing Address:

767 S ST RD 7
SUITE 13
MARGATE, FL 33068

New Mailing Address:

6775 STIRLING ROAD
DAVIE, FL 33314

FEI Number: 65-1117524

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

KARIM, MIKE
767 S. STATE RD. 7 SUITE 13
MARGATE, FL 33068 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

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: DP () Delete
Name: KARIM, MIKE
Address: 767 S. STATE RD. 7 SUITE 13
City-St-Zip: MARGATE, FL 33068

Title: DVPS () Delete
Name: MAJID, AL
Address: 767 S. STATE RD 7 SUITE 13
City-St-Zip: MARGATE, FL 33068

Title: V () Delete
Name: MAJID, SHAFI
Address: 767 S. STATE RD 7 SUITE 13
City-St-Zip: MARGATE, FL 33068

Title: V () Delete
Name: NAVIWALA, QADIR A
Address: 767 S. STATE RD 7 SUITE 13
City-St-Zip: MARGATE, FL 33068

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:

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

I hereby certify that the information supplied with this filing does not qualify 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: MOHAMMED KARIM

DP

04/29/2008

Electronic Signature of Signing Officer or Director

Date