

# 2011 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P01000073509

Entity Name: ALAD ENTERPRISES CORP.

FILED  
Mar 30, 2011  
Secretary of State

## Current Principal Place of Business:

6095 NORTH WEST 167TH STREET UNIT D-8  
MIAMI LAKES, FL 33015

## New Principal Place of Business:

6175 NORTH WEST 167TH STREET UNIT G-26  
MIAMI LAKES, FL 33015

## Current Mailing Address:

6095 NORTH WEST 167TH STREET UNIT D-8  
MIAMI LAKES, FL 33015

## New Mailing Address:

6175 NORTH WEST 167TH STREET UNIT G-26  
MIAMI LAKES, FL 33015

FEI Number: 65-1125496

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

TAX HOUSE CORPORATION  
1100 S. FEDERAL HWY  
DEERFIELD BEACH, FL 33441 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

## OFFICERS AND DIRECTORS:

Title: D  
Name: ARKALJI, CHARLES  
Address: 6175 NORTH WEST 167TH STREET UNIT G-26  
City-St-Zip: MIAMI LAKES, FL 33015

Title: D  
Name: ARKALJI, RAFI  
Address: 6175 NORTH WEST 167TH STREET UNIT G-26  
City-St-Zip: MIAMI LAKES, FL 33015

Title: M  
Name: WOLAK, ALEXANDRE  
Address: 6175 NW 167TH ST SUITE G-26  
City-St-Zip: MIAMI LAKES, FL 33015

Title: M  
Name: BUKAHI, LEILA  
Address: 6175 NW 167TH ST SUITE G-26  
City-St-Zip: MIAMI LAKES, FL 33015

I hereby 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 all other like empowered.

SIGNATURE: ALEX WOLAK

VP

03/30/2011

\_\_\_\_\_ Electronic Signature of Signing Officer or Director

\_\_\_\_\_ Date