

**2005 FOR PROFIT CORPORATION
ANNUAL REPORT**

FILED
Apr 05, 2005 8:00 am
Secretary of State

04-05-2005 90051 006 ***150.00

DOCUMENT # P01000097466

1. Entity Name
MIAMI AUTOTRONIC AND SPEED WORLD, INC.



Principal Place of Business

**2025 W 62TH ST
HIALEAH, FL 33016**

Mailing Address

**2025 W 62TH ST
HIALEAH, FL 33016**

DO NOT WRITE IN THIS SPACE



03282005 No Chg-P CR2E034 (10/03)

4. FEI Number
65-1141788

Applied For
Not Applicable

5. Certificate of Status Desired ☐ **\$8.75 Additional
Fee Required**

6. Name and Address of Current Registered Agent

**ALLADIN, SAM
2606 HARTWOOD PINES WAY
CLERMONT, FL 34711**

**DO NOT WRITE
IN THIS SPACE**

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

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

**FILE NOW!!! FEE IS \$150.00
After May 1, 2005 Fee will be \$550.00**

9. Election Campaign Financing
Trust Fund Contribution. ☐

**\$5.00 May Be
Added to Fees**

10. OFFICERS AND DIRECTORS

TITLE NAME STREET ADDRESS CITY-ST-ZIP	P ALLADIN, FAIZUL 1083 SW 142ND PL MIAMIAH, FL 33184
TITLE NAME STREET ADDRESS CITY-ST-ZIP	S ALLADIN, BIBI 11420 SW 28 STREET 2606 Hartwood Pines Way MIAMI, FL 33185 Clermont, FL 34711
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VP ALLADIN, SAM 11420 SW 28TH ST 2606 Hartwood Pines Way MIAMI, FL 33185 Clermont, FL 34711
TITLE NAME STREET ADDRESS CITY-ST-ZIP	OT ALLADIN, SHENEZA 11420 SW 28 ST 2025 W 62nd St MIAMI, FL 33185 Hialeah, FL 33016
TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	

**DO NOT WRITE
IN THIS SPACE**

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.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

3-31-05 705-828-6600