

**2007 FOR PROFIT CORPORATION  
ANNUAL REPORT**

**FILED**  
**Jun 27, 2007 08:00 AM**  
**Secretary of State**

DOCUMENT # P01000097466

1. Entry 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



06222007 No Chg-P CR2E034 (11/05)

**DO NOT WRITE IN THIS SPACE**

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  
Due by September 14, 2007**

9. Election Campaign Financing  
Trust Fund Contribution. ☐

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

In accordance with s. 607.193(2)(b), F.S., the  
corporation did not receive the prior notice.

10. OFFICERS AND DIRECTORS

TITLE	P
NAME	ALLADIN, FAIZUL
STREET ADDRESS	1083 SW 142ND PL
CITY-ST-ZIP	MIAMIAH, FL 33184
TITLE	S
NAME	ALLADIN, BIBI
STREET ADDRESS	2606 HARTWOOD PINES WAY
CITY-ST-ZIP	CLERMONT, FL 34711
TITLE	VP
NAME	ALLADIN, SAM
STREET ADDRESS	2606 HARTWOOD PINES WAY
CITY-ST-ZIP	CLERMONT, FL 34711
TITLE	OT
NAME	ALLADIN, SHENEZA
STREET ADDRESS	2025 W 62ND ST
CITY-ST-ZIP	HIALEAH, FL 33016
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

U000000786670  
06/27/07-80001-003 150.00

**DO NOT WRITE  
IN THIS SPACE**

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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]*  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

6-22-07

Date

305-761-3588

Daytime Phone \*