## **2005 FOR PROFIT CORPORATION ANNUAL REPORT**

SIGNATURE:

## Mar 14, 2005 8:00 am Secretary of State **DOCUMENT # P01000114498** 03-14-2005 90086 022 \*\*\*160.00 1. Entity Name AL HUMD, INC. Principal Place of Business Mailing Address 2859 BIRD AVE. 2859 BIRD AVE. MIAMI, FL 33133 MIAMI, FL 33133 01052005 No Chg-P CR2E034 (10/03) DO NOT WRITE IN THIS SPACE 4. FEI Number Applied For 65-1154921 Not Applicable \$8.75 Additional 5. Certificate of Status Desired 8. Name and Address of Current Registered Agent GHAÑÎ, NELOFAR J DO NOT WRITE 14402 SW 113 TER KENDALL MIAMI, FL 33186 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. 9. Election Campaign Financing \$5.00 May Be FILE NOW!!! FEE IS \$150.00 After May 1, 2005 Fee will be \$550.00 Trust Fund Contribution. Added to Fees 10. OFFICERS AND DIRECTORS TITLE NAME **GHANI, NELOFAR J** STREET ADDRESS 14402 SW 113 TER CITY-ST-7P MIAMI, FL 33186 tms **MUL, FAHIEM** NAME 14250 SW 90 TER STREET ADDRESS CITY-ST-ZIP MIAMI, FL 33186 NAME STREET ADDRESS DO NOT WRITE CITY-ST-7IP TITLE IN THIS SPACE NAME STREET ADDRESS CITY-ST-7IP ITTLE NAME STREET ADDRESS CITY-SI-ZIP MLE NAME STREET ADDRESS CITY-ST-ZIP 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.

FILED

Daytime Phone #