

2004 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 26, 2004 8:00 am
Secretary of State

04-26-2004 90579 039 ***150.00

DOCUMENT # P02000079424 1. Entity Name KHAN FAMILY PARTNERSHIP, INC.			
Principal Place of Business 18338 FRESH LAKE WAY BOCA RATON, FL 33498		Mailing Address 18338 FRESH LAKE WAY BOCA RATON, FL 33498	
2. Principal Place of Business 10245 LA Reina Rd Suite, Apt. #, etc. Delray Beach, FL City & State		3. Mailing Address 10245 LA Reina Rd Suite, Apt. #, etc. Delray Beach, FL City & State	
Zip 33446 Country PAUM BEACH		Zip 33446 Country PAUM BEACH	
4. FEI Number 72-1530238		Applied For ☐ Not Applicable	
5. Certificate of Status Desired ☐		\$8.75 Additional Fee Required	
6. Name and Address of Current Registered Agent KHAN, MOHAMMED DINA 10245 LA REINA RD DELRAY BEACH, FL 33442		7. Name and Address of New Registered Agent Name MOHAMMED D. KHAN Street Address (P.O. Box Number is Not Acceptable) 10245 LA Reina Rd Delray Beach City FL Zip Code 33446	
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 fee if applicable.		DATE 4/22/04 (NOTE: Registered Agent signature required when reissuing)	
FILE NOW!!! FEE IS \$150.00 After May 1, 2004 Fee will be \$550.00		9. Election Campaign Financing Trust Fund Contribution. ☐ \$5.00 May Be Added to Fees	
10. OFFICERS AND DIRECTORS		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE DPTS ☒ Delete NAME AKTHER, HABIBA STREET ADDRESS 10245 LA REINA RD CITY-ST-ZIP DELRAY BEACH, FL 33442		TITLE DPTS ☒ Change ☐ Addition NAME HABIBA AKTHER STREET ADDRESS 10245 LA Reina Rd. CITY-ST-ZIP DELRAY BEACH, FL-33446	
TITLE ☐ Delete NAME STREET ADDRESS CITY-ST-ZIP		TITLE ☐ Change ☐ Addition NAME STREET ADDRESS CITY-ST-ZIP	
TITLE ☐ Delete NAME STREET ADDRESS CITY-ST-ZIP		TITLE ☐ Change ☒ Addition NAME D MOHAMMED D. KHAN STREET ADDRESS 10245 LA REINA Rd. CITY-ST-ZIP Delray Beach, FL-33446	
TITLE ☐ Delete NAME STREET ADDRESS CITY-ST-ZIP		TITLE ☐ Change ☐ Addition NAME STREET ADDRESS CITY-ST-ZIP	
TITLE ☐ Delete NAME STREET ADDRESS CITY-ST-ZIP		TITLE ☐ Change ☐ Addition 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 118.07(3)(f), 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 ISSUING OFFICER OR DIRECTOR		DATE 4/22/04 954-520-0822 Date	