2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P02000085099

Entity Name: THE FORMULA, INC.

City-St-Zip:

FILED Jan 17, 2005 Secretary of State

_many man		TANGERA, HAG.					
Current Principal Place of Business:				New Principal Place of Business:			
10234 SW DAVIE, FL	26 STREET . 33324						
Current Mailing Address:				New Mailing Address:			
10234 SW DAVIE, FL	26 STREET . 33324						
FEI Number	: 03-0493059	FEI Number Applied For ()	FEI Nun	nber Not Appl	licable ()	Certificate of Status Desired ()	
Name and Address of Current Registered Agent:				Name and Address of New Registered Agent:			
MANIAR, RAJU 7737 N. UNIVESITY DRIVE #201 TAMARAC, FL 33321 US				PATEL, SONA K ESQ. 501 S.E. 2ND STREET SUITE 1423 FT. LAUDERDALE, FL 33301 US			
	e named entity e of Florida.	submits this statement for the p	urpose o	f changing i	ts registered	d office or registered agent, or both,	
SIGNATURE: SONA K. PATEL				01/17/2005			
	Electro	nic Signature of Registered Age	nt			Date	
Election Car	mpaign Financir	ng Trust Fund Contribution ().					
OFFICERS AND DIRECTORS:				ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:			
Title: Name: Address: City-St-Zip:	P (SHAUKAT, KA 10234 SW 26 DAVIE, FL 33	STREET		Title: Name: Address: City-St-Zip:		() Change () Addition	
Title: Name: Address: City-St-Zip:	VP (FARHAN, NAS 9660 SW 112I MIAMI, FL 33	ND AVE		Title: Name: Address: City-St-Zip:	VP FARHAN, NA 9660 SW 11 MIAMI, FL 3	2ND AVE	
Title: Name: Address: City-St-Zip:	() Delete		Title: Name: Address: City-St-Zip:	SEC. SHAUKAT, K 10234 S.W. DAVIE, FL	26TH STREET	
Title: Name: Address:	() Delete		Title: Name: Address:	TREA SHAUKAT, K 10234 S.W.	()Change(X)Addition ASHIF 26TH STREET	

I hereby certify that the information supplied with this filing does not qualify for the 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 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 an address, with all other like empowered.

City-St-Zip:

DAVIE, FL 33324

SIGNATURE: KASHIF SHAUKAT PRES 01/17/2005