

2005 FOR PROFIT CORPORATION AMENDED ANNUAL REPORT

DOCUMENT# P02000085099

Entity Name: THE FORMULA, INC.

FILED
Apr 11, 2005
Secretary of State

Current Principal Place of Business:

10234 SW 26 STREET
DAVIE, FL 33324

New Principal Place of Business:

Current Mailing Address:

10234 SW 26 STREET
DAVIE, FL 33324

New Mailing Address:

FEI Number: 03-0493059

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

PATEL, SONA K ESQ.
501 S.E. 2ND STREET
SUITE 1423
FT. LAUDERDALE, FL 33301 US

Name and Address of New Registered Agent:

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.

SIGNATURE: _____

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: SHAUKAT, KASHIF
Address: 10234 SW 26 STREET
City-St-Zip: DAVIE, FL 33324

Title: VP () Delete
Name: FARHAN, NASEER
Address: 9660 SW 112ND AVE
City-St-Zip: MIAMI, FL 33186

Title: SEC. () Delete
Name: SHAUKAT, KASHIF
Address: 10234 S.W. 26TH STREET
City-St-Zip: DAVIE, FL 33324

Title: TREA () Delete
Name: SHAUKAT, KASHIF
Address: 10234 S.W. 26TH STREET
City-St-Zip: DAVIE, FL 33324

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: SEC. (X) Change () Addition
Name: GREENBAUM, JUSTIN
Address: 100 N. FEDERAL HWY. #619
City-St-Zip: FT. LAUDERDALE, FL 33301

Title: () Change () Addition
Name:
Address:
City-St-Zip:

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.

SIGNATURE: KASHIF SHAUKAT

PRES

04/11/2005

Electronic Signature of Signing Officer or Director

Date