

2008 FOR PROFIT CORPORATION ANNUAL REPORT (AR)

FILED
Mar 10, 2008 08:00 A
Secretary of State

DOCUMENT # P02000128687

1. Entity Name

AUPAL, INC.



Principal Place of Business

4701 NORTHWEST 14TH STREET
LAUDERHILL FL 33313

Mailing Address

4701 NORTHWEST 14TH STREET
LAUDERHILL FL 33313



2. Principal Place of Business - No P.O. Box #

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

1st MOORE

CR2E034 (10/07)

4. FE# Number
11-3665807

Applied For
Not Applicable

Zip

Country

Zip

Country

5. Certificate of Status Desired ☐ \$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

KAMAL, MOHAMMED M
4701 NW 14 ST
LAUDERHILL FL 33313

7. Name and Address of New Registered Agent

Name

Street Address (P.O. Box Number is Not Acceptable)

City

FL

Zip Code

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 reappointing)

DATE

FILE NOW!!! FEE IS \$150.00
After May 1, 2008 Fee Will Be \$550.00
Make Check Payable to Florida Department of State

9. Election Campaign Financing
Trust Fund Contribution. ☐ \$5.00 May Be
Added to Fees

10. OFFICERS AND DIRECTORS

TITLE PD ☐ Delete
NAME KAMAL, MOHAMMED M
STREET ADDRESS 4701 NORTHWEST 14TH STREET
CITY-ST-ZIP LAUDERHILL FL 33313

TITLE VD ☐ Delete
NAME HELAL, MOHAMMED
STREET ADDRESS 4701 NORTHWEST 14TH STREET
CITY-ST-ZIP LAUDERHILL FL 33313

TITLE SD ☐ Delete
NAME MAJUMDER, RATAN L
STREET ADDRESS 4701 NORTHWEST 14TH STREET
CITY-ST-ZIP LAUDERHILL FL 33313

TITLE TD ☐ Delete
NAME DEBNATH, SANJIB K
STREET ADDRESS D701 NORTHWEST 14TH STREET
CITY-ST-ZIP LAUDERHILL FL 33313

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP 03/25/08-80031-012 138.75

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP 03/25/08-80031-012 150.00

TITLE ☐ Change ☐ Addition
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CITY-ST-ZIP

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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 exemptions contained in Section 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: X

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

M.M. KAMAL

3-5-08

Date

954-424-1327

Day, Mo, Year