



# 2005 FOR PROFIT CORPORATION ANNUAL REPORT

**FILED**  
**May 02, 2005 8:00 am**  
**Secretary of State**

05-02-2005 90974 031 \*\*\*150.00

<b>DOCUMENT # P03000024465</b> 1. Entity Name <b>AZDA ARABIANS, INC.</b>																																																																	
Principal Place of Business <b>CHANGE</b> <b>2109 NE 56TH COURT</b> <b>FORT LAUDERDALE, FL 33308</b>				Mailing Address <b>2109 NE 56TH COURT</b> <b>FORT LAUDERDALE, FL 33308</b>																																																													
2. Principal Place of Business <b>3355 SW Trailside Path</b> Suite, Apt. #, etc. <b>lot 23</b>		3. Mailing Address <b>P.O. Box 1720</b> Suite, Apt. #, etc.																																																															
City & State <b>Stuart, Florida</b>		City & State <b>Jupiter, Florida</b>		4. FEI Number <b>30-0168416</b>																																																													
Zip <b>34997</b>		Country <b>U.S.A.</b>		5. Certificate of Status Desired <input type="checkbox"/> <b>\$8.75 Additional Fee Required</b>																																																													
6. Name and Address of Current Registered Agent <b>MCGILL, KIMBERLY</b> <b>2109 NE 56TH COURT</b> <b>FORT LAUDERDALE, FL 33308</b> <b>6556 Chasewood North, Apt. G</b> <b>Jupiter, Florida 33458</b>				7. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) City <b>FL</b> 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 <u>Kimberly McGill, Director Kimberly McGill</u> <u>April 28, 2005</u> <small>Signature, typed or printed name of registered agent and if applicable (NOTE: Registered Agent Signature required when constituting) DATE</small>																																																																	
<b>FILE NOW!!! FEE IS \$150.00</b> <b>After May 1, 2005 Fee will be \$550.00</b>			9. Election Campaign Financing <input type="checkbox"/> <b>\$5.00 May Be Added to Fees</b> Trust Fund Contribution.																																																														
10. OFFICERS AND DIRECTORS <table border="1" style="width:100%; border-collapse: collapse;"> <tr> <td style="width: 30%;">TITLE</td> <td style="width: 40%;">NAME</td> <td style="width: 30%;">STREET ADDRESS</td> <td style="width: 10%;">CITY-ST-ZIP</td> <td style="width: 10%; text-align: center;">Delete <input type="checkbox"/></td> </tr> <tr> <td></td> <td><b>D</b></td> <td><b>MCGILL, KIMBERLY</b></td> <td><b>6556 Chasewood North</b></td> <td></td> </tr> <tr> <td></td> <td></td> <td><b>2109 NE 56TH COURT</b></td> <td><b>Apt. G</b></td> <td></td> </tr> <tr> <td></td> <td></td> <td><b>FORT LAUDERDALE, FL 33308</b></td> <td><b>Jupiter, FL 33468</b></td> <td></td> </tr> </table>			TITLE	NAME	STREET ADDRESS	CITY-ST-ZIP	Delete <input type="checkbox"/>		<b>D</b>	<b>MCGILL, KIMBERLY</b>	<b>6556 Chasewood North</b>				<b>2109 NE 56TH COURT</b>	<b>Apt. G</b>				<b>FORT LAUDERDALE, FL 33308</b>	<b>Jupiter, FL 33468</b>		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 <table border="1" style="width:100%; border-collapse: collapse;"> <tr> <td style="width: 30%;">TITLE</td> <td style="width: 40%;">NAME</td> <td style="width: 30%;">STREET ADDRESS</td> <td style="width: 10%;">CITY-ST-ZIP</td> <td style="width: 10%; text-align: center;">Change <input type="checkbox"/> Addition <input type="checkbox"/></td> </tr> <tr><td> </td><td> </td><td> </td><td> </td><td> </td></tr> <tr><td> </td><td> </td><td> </td><td> </td><td> </td></tr> <tr><td> </td><td> </td><td> </td><td> </td><td> </td></tr> <tr><td> </td><td> </td><td> </td><td> </td><td> </td></tr> <tr><td> </td><td> </td><td> </td><td> </td><td> </td></tr> <tr><td> </td><td> </td><td> </td><td> </td><td> </td></tr> <tr><td> </td><td> </td><td> </td><td> </td><td> </td></tr> </table>			TITLE	NAME	STREET ADDRESS	CITY-ST-ZIP	Change <input type="checkbox"/> Addition <input type="checkbox"/>																																			
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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.																																																																	
SIGNATURE: <u>Kimberly McGill</u> <u>Kimberly McGill</u> <u>April 28, 2005</u> <small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #</small>																																																																	