## 2004 FOR PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# P03000047067

City-St-Zip:

FILED Apr 13, 2004 Secretary of State

Entity Na	me: ULMERT	ON ALLIED ENTERPRISES, I	NC.		
Current Principal Place of Business:			New Principal Place	New Principal Place of Business:	
551 58TH STREET NORTH #1 ST. PETERSBURG, FL 33710			8195 ULMERTON ROAD LARGO, FL 33771		
					Current Mailing Address:
551 58TH STREET NORTH #1 ST. PETERSBURG, FL 33710			8195 ULMERTON RO LARGO, FL 33771	8195 ULMERTON ROAD LARGO, FL 33771	
FEI Number	: 90-0122697	FEI Number Applied For ( )	FEI Number Not Applicable ( )	Certificate of Status Desired ( )	
Name and Address of Current Registered Agent:			Name and Address o	Name and Address of New Registered Agent:	
2350-N 34 SUITE 110	Y, LINSTER JR ITH STREET ) RSBURG, FL (				
	e named entity s e of Florida.	submits this statement for the p	purpose of changing its registered	d office or registered agent, or both,	
SIGNATU					
	Electron	ic Signature of Registered Ag	ent	Date	
Election Ca	mpaign Financing	Trust Fund Contribution ( ).			
OFFICER	S AND DIREC	TORS:	ADDITIONS/CHANGE	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS	
Title: Name: Address:	D () ABSAR, MOHAN 551 58TH STRE		Name: ABSAR, MO	(X) Change ( ) Addition HAMMED TREET NORTH #11	

City-St-Zip: ST. PETERSBURG, FL 33710 ST. PETERSBURG, FL 33710 City-St-Zip: ( ) Delete Title: ( ) Change (X) Addition AKTER, MOSAMMAT R Name: Name: Address: Address: 8195 ULMERTON ROAD LARGO, FL 33771 City-St-Zip: City-St-Zip: Title: Title: ( ) Delete ( ) Change (X) Addition Name: Name: AKTER, AZIM Address: Address: 8195 ULMERTON ROAD

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:

LARGO, FL 33771

SIGNATURE: AZIM AKTER PD 04/13/2004