2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P03000063108

Entity Name: REHMAT HOLDINGS CORPORATION

FILED Jul 26, 2005 Secretary of State

Current Principal Place of Business:			New Principal Place of Business:		
5255 NW MIAMI, FL	163RD STREE 33014	Т			
Current Mailing Address:			New Mailing Address:		
5255 NW MIAMI, FL	163RD STREE 33014	Т			
FEI Number	: 20-0104873	FEI Number Applied For ()	FEI Number Not Applicable ()	Certificate of Status Desired ()	
Name and	d Address of C	urrent Registered Agent:	Name and Address o	f New Registered Agent:	
SABJALY, 5255 NW MIAMI, FL	163RD STREE	Т			
	e named entity s e of Florida.	submits this statement for the	purpose of changing its registered	d office or registered agent, or both,	
SIGNATU	RE:				
Electronic Signature of Registered Agent			ent	Date	
		B(2)(b), F.S., the corporation did n	ot receive the prior notice.		
Election Campaign Financing Trust Fund Contribution (). OFFICERS AND DIRECTORS:			ADDITIONS/CHANGE	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:	
Title: Name: Address: City-St-Zip:	PRES () MITHA, SABJAL 5255 NW 163R MIAMI, FL 330	D STREET	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	VP () MITHA, SABJAL 5255 NW 163R MAIMI, FL 330	D STREET	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	TREA () MITHA, SABJAL 5255 NW 163R MIAMI, FL 330	D STREET	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	SECR () MITHA, SABJAL 5255 NW 163R MIAMI, FL 330	D STREET	Title: Name: Address: City-St-Zip:	() Change () Addition	

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: SABJALY MITHA PRES 07/26/2005