

2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P03000063108

FILED
Apr 27, 2006
Secretary of State

Entity Name: REHMAT HOLDINGS CORPORATION

Current Principal Place of Business:

5255 NW 163RD STREET
MIAMI, FL 33014

New Principal Place of Business:

5255 NW 163RD STREET
MIAMI, FL 33014 US

Current Mailing Address:

5255 NW 163RD STREET
MIAMI, FL 33014

New Mailing Address:

5255 NW 163RD STREET
MIAMI, FL 33014 US

FEI Number: 20-0104873

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

SABJALY, MITHA
5255 NW 163RD STREET
MIAMI, FL 33014 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

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: PRES () Delete
Name: MITHA, SABJALY
Address: 5255 NW 163RD STREET
City-St-Zip: MIAMI, FL 33014

Title: VP () Delete
Name: MITHA, SABJALY
Address: 5255 NW 163RD STREET
City-St-Zip: MAIMI, FL 33014

Title: TREA () Delete
Name: MITHA, SABJALY
Address: 5255 NW 163RD STREET
City-St-Zip: MIAMI, FL 33014

Title: SECR () Delete
Name: MITHA, SABJALY
Address: 5255 NW 163RD STREET
City-St-Zip: MIAMI, FL 33014

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change () Addition
Name: MITHA, SABJALY
Address: 5255 NW 163RD STREET
City-St-Zip: MIAMI, FL 33014 US

Title: VPD (X) Change () Addition
Name: MITHA, SABJALY
Address: 5255 NW 163RD STREET
City-St-Zip: MAIMI, FL 33014 US

Title: T (X) Change () Addition
Name: MITHA, SABJALY
Address: 5255 NW 163RD STREET
City-St-Zip: MIAMI, FL 33014 US

Title: S (X) Change () Addition
Name: MITHA, SABJALY
Address: 5255 NW 163RD STREET
City-St-Zip: MIAMI, FL 33014 US

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Chapter 119, 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

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04/27/2006

Electronic Signature of Signing Officer or Director

Date