

2007 FOR PROFIT CORPORATION AMENDED ANNUAL REPORT

DOCUMENT# P04000096205

Entity Name: ALEEF ENTERPRISES, INC.

FILED
Feb 09, 2007
Secretary of State

Current Principal Place of Business:

11401 PINE BLVD
K-922 (PEMBROK LAKE MALL)
PEMBROKE PINES, FL 33026 US

New Principal Place of Business:

Current Mailing Address:

18681 OCEAN MIST DRIVE
BOCA RATON, FL 33498 US

New Mailing Address:

FEI Number: 20-1333966

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

BHULLAR, ALLOUDIN
3080 S. W. 139TH TERRACE
DAVIE, FL 33330 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

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: CHOWDHURY, NAWSHAD
Address: 18681 OCEAN MIST DRIVE
City-St-Zip: BOCA RATON, FL 33498 US

Title: VP () Delete
Name: CHOWDHURY, MOHAMMED O
Address: 11390 SW 2ND CT. BUILDING # 2
City-St-Zip: PEMBROKE PINES, FL 33025

Title: S D () Delete
Name: BHULLAR, ALLOUDIN
Address: 3080 S. W. 139TH TERRACE
City-St-Zip: DAVIE, FL 33330 US

Title: D (X) Delete
Name: MOHAMMED, AZAM R
Address: 11401 PINE BLVD (K-922)
City-St-Zip: PEMBROKE PINE, FL 33026

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

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: NAWSHAD H CHOWDHURY

PRES

02/09/2007

Electronic Signature of Signing Officer or Director

Date