## 2008 FOR PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# P05000060869

Name:

Address:

City-St-Zip:

FILED Mar 06, 2008 Secretary of State

| Entity Nar                                    | ne: AYESHA                                    | ENTERPRISES INC.                 |   |  |                                   |                          |  |
|---|---|----------------------------------|---|--|-----------------------------------|--------------------------|--|
| Current P                                     | rincipal Place                                | of Business:                     | New Princ                                   | New Principal Place of Business:                     |                                   |                          |  |
|   | 191 TERRACE<br>(E PINES, FL                   |                                  |   |  |                                   |                          |  |
| Current M                                     | ailing Addre                                  | ss:                              | New Maili                                   | New Mailing Address:                                 |                                   |                          |  |
|   | 191 TERRACE<br>(E PINES, FL                   |                                  |   |  |                                   |                          |  |
| FEI Number:                                   | Number: 20-2740277 FEI Number Applied For ( ) |                                  | FEI Number Not Applicable ( )               |  | Certificate of Status Desired ( ) |                          |  |
| Name and Address of Current Registered Agent: |   |                                  |   | Name and Address of New Registered Agent:            |                                   |                          |  |
|   | AROON<br>191 TERRACE<br>(E PINES, FL          |                                  |   |  |                                   |                          |  |
|   | named entity<br>e of Florida.                 | submits this statement for the p | ourpose of changing i                       | ts registered  | office or reg                     | gistered agent, or both, |  |
| SIGNATUR                                      | RE:   |                                  |   |  |                                   |                          |  |
|   | Electro                                       | nic Signature of Registered Ag   | ent   |  | D                                 | ate                      |  |
| Election Car                                  | npaign Financin                               | g Trust Fund Contribution ( ).   |   |  |                                   |                          |  |
| OFFICERS                                      | S AND DIREC                                   | TORS:                            | ADDITION                                    | ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS          |                                   |                          |  |
| Title:<br>Name:<br>Address:<br>City-St-Zip:   | ISMAIL, MOHA<br>1000 SW 191                   |                                  | Title:<br>Name:<br>Address:<br>City-St-Zip: | P100 (X<br>ISMAIL, MOHA<br>1000 SW 191<br>PEMBROKE F | TERR                              | ,                        |  |
| Title:  | Р (   | ) Delete                         | Title:                                      | VP (   | X) Change(                        | ) Addition               |  |

Name: ISMAIL, HAROON Name: ISMAIL, MOHAMMED R
Address: 1110 SW 191 TERR Address: 1110 SW 191 TERR

City-St-Zip: PEMBROKE PINES, FL 33029 City-St-Zip: PEMBROKE PINES, FL 33029

Title: O () Delete Title: ST (X) Change () Addition

 Name:
 MOOSA, MOHAMMAD H
 Name:
 ISMAIL, MOHAMMED R

 Address:
 2551 E HALLANDALE BCH BLVD
 Address:
 1110 SW 191ST TER

 City-St-Zip:
 HALLANDALE, FL 33009
 City-St-Zip:
 PEMBROKE PINES, FL 33029

Title: O (X) Delete Title: ( ) Change ( ) Addition

SAMANA, GHAZI Name:
2551 E HALLANDALE BCH BLVD Address:
HALLANDALE, FL 33009 City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify 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: MOHAMMAEDR ISMAIL P 03/06/2008