

2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P05000081264

FILED
Aug 14, 2007
Secretary of State

Entity Name: MAYS UNITED ENTERPRISES, INC.

Current Principal Place of Business:

18281 NW 19TH STREET
PEMBROKE PINES, FL 33029

New Principal Place of Business:

Current Mailing Address:

18281 NW 19TH STREET
PEMBROKE PINES, FL 33029

New Mailing Address:

FEI Number: 20-2907243

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

GHAZNAVI, SHARIQ
18281 NW 19TH STREET
PEMBROKE PINES, FL 33029 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

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: GHAZNAVI, SHARIQ
Address: 18281 NW 19TH STREET
City-St-Zip: PEMBROKE PINES, FL 33029

Title: V () Delete
Name: ANJUM, RUBINA
Address: 6701 JOHNSON STREET
City-St-Zip: HOLLYWOOD, FL 33024

Title: V () Delete
Name: KAZI, NOREEN
Address: SS 65 W 12TH COURT
City-St-Zip: HIALEAH, FL 33012

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

Title: S (X) Change () Addition
Name: KAZI, NOREEN
Address: SS 65 W 12TH COURT
City-St-Zip: HIALEAH, FL 33012

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: SHARIQ GHAZNAVI

P

08/14/2007

Electronic Signature of Signing Officer or Director

Date