## P05000127315

| (Requestor's Name)                      |
|---|
| (Address)                               |
| •                                       |
| (Address)                               |
| (City/State/Zip/Phone #)                |
| (Sityrotates Elph Holle #)              |
| PICK-UP WAIT MAIL                       |
| (Business Entity Name)                  |
| (Business Entity Name)                  |
| (Document Number)                       |
| (Cooling National)                      |
| Certified Copies Certificates of Status |
| Special Instructions to Filing Officer: |
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FLÜGETARY OF STATE, OF AHASSEE, FLORING.

## **COVER LETTER**

| TO: Amendment Section Division of Corporations                            | -   |
|---|---|
| SUBJECT: KHARTOUM ENTERPRISES, INC. (Name of Corporation                  | on)   |
| DOCUMENT NUMBER: P05000127315   |   |
| The enclosed Statement of Change of Registered Office/Agent               | and fee are submitted for filing.   |
| Please return all correspondence concerning this matter to the fo         | ollowing:   |
| BADER KALID (Name of Contact Per  | son)  |
| KHARTOUM ENTERPRISES, INC<br>(Firm/Company)                               | <u>C.</u>   |
| 14704 N.E 6TH AVENUE (Address)  |   |
| MIAMI, FLORIDA 33161 (City/State and Zip Co                               | ode)  |
| For further information concerning this matter, please call:              | ,   |
| BADER KALID (Name of Contact Person) at (3                                | 05 ) 940-0784<br>area Code & Daytime Telephone Number)                      |
| Enclosed is a \$35.00 check made payable to the Department of             | State.  |
| Mailing Address: Amendment Section Division of Corporations P.O. Box 6327 | Street Address: Amendment Section Division of Corporations Clifton Building |

2661 Executive Center Circle Tallahassee, FL 32301

Tallahassee, FL 32314

CR2E045 (8/05)

## STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH FOR CORPORATIONS

| statement of change is submitted for a corporation organized under the laws of the State of 078   | 4  | <u>.</u>                                |
|---|--|---|
| in order to change its registered office or registered agent, or both, in the State of Florid   | la.  |   |
| I. The name of the corporation: KHARTOUM ENTERPRISES, INC.  |  |   |
| 2. The principal office address: 14704 N.E 6TH AVENUE   |  |   |
| MIAMI, FLORIDA 33161  |  |   |
| 3. The mailing address (if different):  |  | <del></del>                             |
| 4. Date of incorporation/qualification: 09/15/2005 Document number: P05000127   | 315  |   |
| 5. The name and street address of the current registered agent and registered office on file with the Florida Department of State:  | C  |   |
| ENTSAR HUSSAIN  |  |   |
| 14704 N.E 6TH AVENUE  |  |   |
| MIAMI, FLORIDA 33161  | ,  |   |
| 6. The name and street address of the new registered agent (if changed) and /or registered office (if changed):   | OG FEE   | *************************************** |
| BADER KALID   | LSS.   | -                                       |
| 14704 N.E 6TH AVENUE  | P. P.  | m                                       |
| (P.O. Box NOT acceptable)   | S  |   |
| MIAMI, FLORIDA 33161  |  |   |
| The street address of its registered office and the street address of the business office of its regard as changed will be identical.   |  | ıt,                                     |
| Such change was authorized by resolution duly adopted by its board of directors or by an officult authorized by the board, or the corporation has been notified in writing of the change.   | cer so   |   |
| Such Bude (Frinted of Oped name and title)  | <del></del>                                      | ~                                       |
| I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relative to the proper and complet of my duties, and I am familiar with and accept the obligation of my position as registered ag document is being filed merely to reflect a change in the registered office address, I hereby corporation has been notified in writing of this change. | 'e performan<br>ent. Or, if th<br>infirm that ti | ce<br>iis<br>ie                         |
| Baden halis 01-03-06 (Signature of Registered Agent) (Date)   |  | -                                       |
| If signing on behalf of an entity:  |  |   |
| (Typed or Printed Name)   |  |   |
| * * * FILING FEE: \$35.00 * * *   |  |   |

MAKE CHECKS PAYABLE TO FLORIDA DEPARTMENT OF STATE MAIL TO: DIVISION OF CORPORATIONS, P.O. BOX 6327, TALLAHASSEE, FL 32314 CR2E045 (8/05)