

2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P06000107780

Entity Name: KHATOON ENTERPRISES, INC.

FILED
Jan 31, 2007
Secretary of State

Current Principal Place of Business:

9161 N W 24TH. COURT
SUNRISE, FL 33322 US

New Principal Place of Business:

Current Mailing Address:

9161 N W 24TH. COURT
SUNRISE, FL 33322 US

New Mailing Address:

FEI Number: 61-1507969

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

MOSHATAQUE, AHMAD
9161 N W 24TH. COURT
SUNRISE, FL 33322 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: P,D () Delete
Name: KHATOON, AMENA
Address: 9161 N W 24TH. COURT
City-St-Zip: SUNRISE, FL 33322 US

Title: S,D () Delete
Name: MOSHTAQUE, AHMAD
Address: 9161 N W 24TH. COURT
City-St-Zip: SUNRISE, FL 33322 US

Title: VP,D (X) Delete
Name: ABEDIN, MD Z
Address: 1927 S E HARGRAVE STREET
City-St-Zip: ARCADIA, FL 34266 US

Title: VP,T () Delete
Name: HAQUE, MOHAMMED
Address: 2041 N.E. COLLINS, APT #580
City-St-Zip: JENSEN BEACH, FL 34957 US

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: MOSHTAQUE AHMAD

SD

01/31/2007

Electronic Signature of Signing Officer or Director

Date