

**2008 FOR PROFIT CORPORATION
ANNUAL REPORT**

FILED
Mar 03, 2008 8:00 am
Secretary of State

01-17-2008 90030 006 ***150.00
03-03-2008 90183 032 ***150.00

DOCUMENT # P06000113487

1. Entity Name
AVENUE U CORPORATION



Principal Place of Business
**1241 AVENUE U
RIVIERA BEACH, FL 33404 FL**

Mailing Address
**1241 AVENUE U
RIVIERA BEACH, FL 33404 FL**

DO NOT WRITE IN THIS SPACE



01082008 No Chg-P CR2E034 (11/05)

4. FEI Number
20-5478058

Applied For
Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

**ABDELDAYEM, ABRAHIM
3309 NW 77 ST
MIAMI, FL 33125**

**DO NOT WRITE
IN THIS SPACE**

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE _____

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE _____

**FILE NOW!!! FEE IS \$150.00
After May 1, 2008 Fee will be \$550.00**

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

10. OFFICERS AND DIRECTORS

TITLE	P
NAME	ABDELDAYEM, ABRAHIM
STREET ADDRESS	12872 SW 115TH TERRACE
CITY- ST- ZIP	MIAMI, FL 33186
TITLE	VP
NAME	ABDELDAYEM, ISMAIL
STREET ADDRESS	12872 SW 115TH TERRACE
CITY- ST- ZIP	MIAMI, FL 33186
TITLE	
NAME	
STREET ADDRESS	
CITY- ST- ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY- ST- ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY- ST- ZIP	

**DO NOT WRITE
IN THIS SPACE**

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: Abraham Abdeldayem

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

08/28/08

Date

561-840-1748

Daytime Phone #