


2008 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Feb 04, 2008 08:00 AM
Secretary of State


DOCUMENT # P06000154328

1. Entity Name
ALAD'N ENTERPRISES, INC.



Principal Place of Business
**6801 LAKE WORTH ROAD, SUITE 119
 LAKE WORTH, FL 33467**

Mailing Address
**6801 LAKE WORTH ROAD, SUITE 119
 LAKE WORTH, FL 33467**

01072008 No Chg-P CR2E034 (11/05)

4. FEI Number
06-1801777

Applied For
 Not Applicable

5. Certificate of Status Desired **\$8.75 Additional Fee Required**

6. Name and Address of Current Registered Agent

**FRIEDMAN, ANNETTE
 6801 LAKE WORTH ROAD, SUITE 119
 LAKE WORTH, FL 33467**



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)

U00000916027
 02/14/08-80632-025 150.00

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

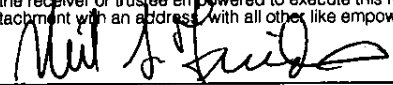
9. Election Campaign Financing Trust Fund Contribution. **\$5.00 May Be Added to Fees**

10. OFFICERS AND DIRECTORS

TITLE NAME STREET ADDRESS CITY-ST-ZIP	D FRIEDMAN, ANNETTE 6801 LAKE WORTH ROAD, SUITE 119 LAKE WORTH, FL 33467
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PST FRIEDMAN, NEIL 6801 LAKE WORTH ROAD, SUITE 119 LAKE WORTH, FL 33467
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TITLE NAME STREET ADDRESS CITY-ST-ZIP	



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:  **1/30/08**
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #