FILED May 28, 2008 8:00 am Secretary of State 05-01-2008 90231 047 ***150.00

2008 FOR PROFIT CORPORATION ANNUAL REPORT

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DOCUMENT # P07000129912 1. Entity Name ALADEN'S KABAB INC.										22.111
Principal Place	e of Busines	·s	Mail	Mailing Address						
3415 MAIN HWY COCONUT GROW, FL 33133				3415 MAIN HWY COCONUT GROW, FL 33133				12401	DI GTIR KRIR IRIKE IRIBLER	i i kii ssa oli k ys i
2. Principal Place of Business - No P.O. Box #			3. Mailing Address							
Suite, Apt. #. etc.			Suite, Apt. #, etc.				04032008	Chg-P	CR2E034 (12/0	
City & State			City & State				4. FEI Num	2-174	9/60	Applied For Not Applicable
Zip	Country			Zip Сои		ilry	5. Certificat		Fee Req	Additional ulred
6. Name and Address of Current Registered Agent						Name	7. Name an	d Address of New R	legistered Agent	
ZAMMAR, ANTOINE 1971 SW 33TH AVE. MIAMI, FL 33145						Street Address (P.O. Box Number is Not Acceptable)				
					City			FL Zip C	Code	
 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										
SIGNLY LONG: Signalive, hosed or printed herne of registered agent and lide if appaicable (NOTE: Registered Agent signalive required when remetating) DATE										
FILE NOWID FEE IS \$150.00 After May 1, 2008 Fee will be \$550.00 9. Election Campaign Financing \$5.00 May Be Trust Fund Contribution. Added to Fees										
F10.2		OFFICERS AND	DIRECT	ORS	11.		ADDITIONS	CHANGES TO OFF	ICERS AND DIRECT	ORS IN 11
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12. I hereby certify that the information supplied with this filling does not qualify for the exemptions contained in Chapter 119, Florida Statuce. 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 trusted 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: **DIRECT:** **PROOF** **TOTAL TABLE** **PROOF** **TOTAL TABLE** **PROOF** **TOTAL TABLE** **PROOF** **TOTAL TABLE** **TOTAL TABL										
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