2008 FOR PROFIT CORPORATION ANNUAL REPORT

FILED Feb 21, 2008 8:00 am Secretary of State

| DOCUMENT # P94000011247 1. Entity Name AMERICAN BOYS, INC. | | | | | 02-21-2008 90020 045 ***150.0 | 00 | | | |
|---|--|---|--------------------|--|---|----------------|--|--|--|
| Principal Plac | e of Business | Mailing Address | | | - | | | | |
| Principal Place of Business 13899 S.W. 142 AVE. | | 13899SW142AVE | | | | | | | |
| MIAMI, FL 3 | | MIAMI, FL 33186 | | | | | | | |
| | | • | | | | | | | |
| 2. Princinal P | flace of Business - No P.O. Box # | 3. Mailing Address | 3. Mailing Address | | | | | | |
| | 1000 of 00011000 710 710 COA 11 | | | | I SHEFFEEL LIE SELIN EIETH ERIN BETH EGIN EFFEN FIEN FIEN FIEN EFEN IDESENZ IN II | | | | |
| Suite, Apt. #, etc. | | Suite, Apt. #, etc. | | | 02192008 Chg-P CR2E034 (12/06) | | | | |
| City & State | | City & State | | | 4. FEI Number Applied I | For | | | |
| City & State | | City a State | | | 65-0462507 Not Appl | | | | |
| Zip | Country | Zip | Count | ry | 5. Certificate of Status Desired \$8.75 Additional | ı | | | |
| | C N | Fig. 1. A A | | | Fee Required | | | | |
| | 6. Name and Address of Current | Registered Agent | | Name | 7. Name and Address of New Registered Agent | | | | |
| KHAN, DIL | .DAR | | | | | | | | |
| 13899SW | | | | Street Address (P.O. Box Number is Not Acceptable) | | | | | |
| MIAMI, FL | 33100 | • | | | 1.00.8.00.1 | | | | |
| | | | } | City | □ Zip Code | | | | |
| | - | | | | FL ` | | | | |
| 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 NOWIII 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 | | | | | | | | | |
| 10. | OFFICERS AND | | 11. | | ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 | | | | |
| NAME . | AHMAD. SHAHZAD | ☑ Delete | TITLE | 1 - | | Addition | | | |
| STREET ADDRESS | 14885 SW 138TH TERRACE | | | Kr | gan Dildar Bag Sw 142 Auc | | | | |
| CITY-ST-ZIP | MIAMI, FL 33186 | | CITY- | | ami FL 33186 | | | | |
| TITLE | | ☐ Delete | TITLE | | ☐ Change ☐ A | Addilion | | | |
| NAME | | | NAME | | | | | | |
| STREET ADDRESS CITY-ST-ZIP | | | | ET ADDRESS ST-ZIP | | Į | | | |
| TITLE | | ☐ Delete | TITLE | | ☐ Change ☐ A | Addition | | | |
| NAME | | | NAME | | _ v.vgv | | | | |
| STREET ADDRESS | | | | ET AODRESS | | | | | |
| CITY-ST-ZIP | | | CITY- | ST-ZIP | | | | | |
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| NAME STREET ADDRESS | | | NAME | T ADDRESS | | ļ | | | |
| CITY-ST-ZIP | | | | ST-ZIP | | | | | |
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| NAME | | | NAME | | | ł | | | |
| STREET ADDRESS | | | | ET ADDRESS | | | | | |
| CITY-ST-ZIP | | | _ | ST-ZIP | D. 4. | Latalis' | | | |
| TITLE | | ☐ Delete | TITLE | | ☐ Change ☐ A | Addition | | | |
| NAME STREET ADDRESS | | | | ET ADDRESS | | | | | |
| CITY-ST-ZIP | | | | ST-ZIP | | | | | |
| 12. I hereby indicated | certify that the information supplied wit on this report or supplemental report i | n this filing does not qualify fo s true and accurate and that n | or the exe | emptions containe ure shall have the | ed in Chapter 119, Florida Statutes. I further certify that the informale same legal effect as if made under oath; that I am an officer or dire | ition ector | | | |

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.

| SIGNATI | JRE: |
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2-19-08

786-242-630

Date

Daytime Phone #