FILE NOW: FILING FEE AFTER MAY 1 IS $225.00

CORPORATION ANNUAL REPORT 1995

FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

FILED
95 APR 10 PM 9:46
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # P94000020421 (1)

1. Corporation Name
HAJI III CORP.

Principal Place of Business	Mailing Address
11825 S.W. 119TH PLACE MIAMI FL 33186	11825 S.W. 119TH PLACE MIAMI FL 33186

DO NOT WRITE IN THIS SPACE.

3. Date Incorporated or Qualified: 03/16/1994
3a. Date of Last Report:

2. Principal Place of Business — 21
2a. Mailing Address — 26
Suite, Apt. #, etc. — 22 / 27
City & State — 23 / 28
Zip — 24 / Country — 25 / Zip — 29 / Country — 30

4. FEI Number: 65-0479332 ☐ Applied For ☐ Not Applicable
5. Certificate of Status Desired ☐ $8.75 Additional Fee Required
6. Election Campaign Financing Trust Fund Contribution ☐ $5.00 May Be Added to Fees
8. This corporation has liability for intangible tax under S. 199.032, Florida Statutes ☐ Yes ☐ No

9. Name and Address of Current Registered Agent

ABID, MOHAMMED S
11825 S.W. 119TH PLACE
MIAMI FL 33186

10. Name and Address of New Registered Agent

81 Name
82 Street Address (P.O. Box Number is Not Acceptable)
83
84 City FL 85 Zip Code

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE _____ DATE
Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating)

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12		
TITLE	PSTD	1.1 TITLE	V. President	☐ Change ☒ Addition
NAME	ABID, MOHAMMAD S	1.2 NAME	JAMIL AHMED	
STREET ADDRESS	11825 S.W. 119TH PLACE	1.3 STREET ADDRESS	19930 N.E 2nd CT	
CITY-ST-ZIP	MIAMI FL 33186	1.4 CITY-ST-ZIP	N.MIAMI - FL - 33179	
TITLE	SECRETARY	2.1 TITLE		☐ Change ☐ Addition
NAME	ALAMGIR BASHIR	2.2 NAME		
STREET ADDRESS	12054 S.W. 119 TERR	2.3 STREET ADDRESS		
CITY-ST-ZIP	MIAMI - FL 33186	2.4 CITY-ST-ZIP		
TITLE	VICE PRESIDENT	3.1 TITLE		☐ Change ☐ Addition
NAME	SHAKIL AHMED	3.2 NAME		
STREET ADDRESS	10651 S.W. 108 CT, # K-3	3.3 STREET ADDRESS		
CITY-ST-ZIP	MIAMI - FL. 33186	3.4 CITY-ST-ZIP		
TITLE	TREASURE	4.1 TITLE		☐ Change ☐ Addition
NAME	KAMRAN NASIR	4.2 NAME		
STREET ADDRESS	12040 S.W. 118 ST	4.3 STREET ADDRESS		
CITY-ST-ZIP	MIAMI - FL 33186	4.4 CITY-ST-ZIP		
TITLE	V. President	5.1 TITLE		☐ Change ☐ Addition
NAME	ASIF [redacted] RAFIQ	5.2 NAME		
STREET ADDRESS	12040 S.W. 118 ST	5.3 STREET ADDRESS		
CITY-ST-ZIP	MIAMI - FL - 33186	5.4 CITY-ST-ZIP		
TITLE	V. President	6.1 TITLE		☐ Change ☐ Addition
NAME	IRFAN ABID	6.2 NAME		
STREET ADDRESS	11825 S.W. 119 PL	6.3 STREET ADDRESS		
CITY-ST-ZIP	MIAMI - FL 33186	6.4 CITY-ST-ZIP		

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual 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 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE: [signature] ALAMGIR BASHIR 3/7/95 (305) 255-0565
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #

0450000 FP