## FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

**PROFIT** 

Block 12 or Block 13 if changed, or on ap attachmen

SIGNATURE:

Mar 12 1998 8:00am CORPORATION Sandra B. Mortham ANNUAL REPORT Secretary of State Secretary of State 1998 DIVISION OF CORPORATIONS DOCUMENT # P94000020421 (1) HAJI III CORP. Principal Place of Business Mailing Address 13623 S DIXIE HWY 147 13623 S DRIVE HWY 147 MIAM! FL 33176 MIAMI FL 33176 DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified 03/16/1994 2. Principal Place of Business 2a. Mailing Address 4. FEI Number Applied For 26 65-0479332 21 Not Applicable Suite, Apt. #, etc. Suite, Apt. #, etc. \$8.75 Additional 5. Certificate of Status Desired Fee Required 22 27 City & State City & State 6. Election Campaign Financing \$5,00 May Be 28 Trust Fund Contribution Added to Fees Zip Country Country 8. This corporation owes or has paid the current year Intangible 29 Personal Property Tax due June 30. ☐ Yes □ No 24 25 30 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent 81 Name ABID, MOHAMMED S 11825 S.W. 119TH PLACE Street Address (P.O. Box Number is Not Acceptable) MIAM! FL 33186 83 84 City 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 registored agent, or both, in the State of Florida Suct) change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with and other interests of the purpose of changing its registered agent. I am familiar with add on the purpose of changing its registered agent. I am familiar with add of the purpose of changing its registered agent. I am familiar with a document of the purpose of changing its registered agent. I am familiar with a document of the purpose of changing its registered agent. I am familiar with a document of the purpose of changing its registered agent. I am familiar with a document of the purpose of changing its registered agent. I am familiar with a document of the purpose of changing its registered agent. I am familiar with a document of the purpose of changing its registered agent. I am familiar with a document of the purpose of changing its registered agent. I am familiar with a document of the purpose of changing its registered agent. I am familiar with a document of the purpose of changing its registered agent. I am familiar with a document of the purpose of the **SIGNATURE** DEFICERS AND DIRECTORS (NOTE Registered Agent signature required when rainstating) DATE ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 12. 13. TITLE DELETE 1.1 TITLE NOHAMMAD S. ABID **IRFAN ABID** NAME 1.2 NAME STREET ADDRESS 11825 SW 119 PL 1.3 STREET ADDRESS MIAMI FL CITY-ST-ZIP 1.4 CITY - ST - ZIP DELETE Change Addition TITLE 2.1 TITLE BASHIR, ALAMGIR 2.2 NAME NAME 12054 SW 117 TERR. STREET ADDRESS 2.3 STREET ADDRESS MIAM! FL 2. 4 CITY-ST-ZIP CITY-ST-ZIP DELETE 3.1 TITLE Change ☐ Addition TITLE AHMED, SHAKIL NAME 3.2 NAME 10651 SW 108 CT., #K-3 STREET ADDRESS 3.3 STREET ADDRESS MIAMI FL CITY-ST-ZIP 3.4. CITY-ST-ZIP DELETE. Change Addition TITLE 4.1 TITLE NASIB, KAMPAN NAME 4. 2 NAME 12040 SE +18 ST. STREET ADDRESS 4.3 STREET ADDRESS MIAMI FL CITY-ST-ZIP 4.4 CITY-ST-ZIP DELETE Change Addition TITLE 5.1 TITLE RAFIQ. ASIF NAME 5.2 NAME 12040 SW 118 ST. STREET ADDRESS 5.3 STREET ADDRESS MIAMI FL CITY-ST-ZIP 5.4 CITY-ST-ZIP DELETE 6 1 TITLE Change Addition AHMED, JAMIL 6.2 NAME 19930 NE 2ND CT. STREET ADDRESS **63 STREET ADDRESS** N. MIAMI FL CITY-ST-ZIP 64 CITY-ST-ZIP 14. Thereby certify that the information supplied with this filing 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 the early accurate and that my signature shall have the same legal effect as if made under eath; that I am an officer or director of the corporation or the receiver or trustee impowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in

FLORIDA DEPARTMENT OF STATE

**FILED**