

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

PROFIT
CORPORATION
ANNUAL REPORT
1997



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

FILED
Sep 15 1997 8:00am
Secretary of State

DOCUMENT # P94000090308 (5)

1. Corporation Name
ALYAH ENTERPRISES, INC.



Principal Place of Business
1165 GLENWOOD COURT
WESTON FL 33322

Mailing Address
1165 GLENWOOD COURT
WESTON FL 33326-2907

3. Date Incorporated or Qualified
12/14/1994

3a. Date of Last Report
05/01/1996

2. Principal Place of Business
21 505 N. FEDERAL HWY
Suite, Apt. #, etc.

2a. Mailing Address
26 505 N FEDERAL HWY
Suite, Apt. #, etc.

4. FEI Number
65-0559316

Applied For
Not Applicable

22 City & State
23 POMPANO BEACH - FL
24 Zip 33062 25 Country U.S.A

27 City & State
28 POMPANO BEACH FL
29 Zip 33062 30 Country U.S.A

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

KAHN, DONALD J
627 71 STREET
MIAMI BEACH FL 33141

10. Name and Address of New Registered Agent

81 Name RAJU MANIAR, CPA
82 Street Address (P.O. Box Number is Not Acceptable)
6635 W. COMMERCIAL BLVD # 115
83 TAMARAC
84 City FL 85 Zip Code 33319

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

Signature of Registered Agent

(NOTE: Registered Agent signature required when reinstating)

5/21/97

12. OFFICERS AND DIRECTORS

| | | |
|----------------|---------------------|--------|
| TITLE | DP | DELETE |
| NAME | MERALI, HANIS | |
| STREET ADDRESS | 1165 GLENWOOD COURT | |
| CITY-ST-ZIP | WESTON FL 33322 | |
| TITLE | DS | DELETE |
| NAME | ESMAIL, SADRU | |
| STREET ADDRESS | 1165 GLENWOOD COURT | |
| CITY-ST-ZIP | WESTON FL 33322 | |
| TITLE | | DELETE |
| NAME | | |
| STREET ADDRESS | | |
| CITY-ST-ZIP | | |
| TITLE | | DELETE |
| NAME | | |
| STREET ADDRESS | | |
| CITY-ST-ZIP | | |
| TITLE | | DELETE |
| NAME | | |
| STREET ADDRESS | | |
| CITY-ST-ZIP | | |

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

| | | | |
|--------------------|------------------------|--------|----------|
| 1.1 TITLE | PRESIDENT | Change | Addition |
| 1.2 NAME | SATID NAZIR | | |
| 1.3 STREET ADDRESS | 505 N. FEDERAL HWY | | |
| 1.4 CITY-ST-ZIP | POMPANO BEACH FL 33062 | | |
| 2.1 TITLE | | Change | Addition |
| 2.2 NAME | | | |
| 2.3 STREET ADDRESS | | | |
| 2.4 CITY-ST-ZIP | | | |
| 3.1 TITLE | | Change | Addition |
| 3.2 NAME | | | |
| 3.3 STREET ADDRESS | | | |
| 3.4 CITY-ST-ZIP | | | |
| 4.1 TITLE | | Change | Addition |
| 4.2 NAME | | | |
| 4.3 STREET ADDRESS | | | |
| 4.4 CITY-ST-ZIP | | | |
| 5.1 TITLE | | Change | Addition |
| 5.2 NAME | | | |
| 5.3 STREET ADDRESS | | | |
| 5.4 CITY-ST-ZIP | | | |
| 6.1 TITLE | | Change | Addition |
| 6.2 NAME | | | |
| 6.3 STREET ADDRESS | | | |
| 6.4 CITY-ST-ZIP | | | |

14. I do hereby 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 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: Hanis Merali 5/21/97 204 1786-8700

CR2E034 (9/96)