

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

FILED
May 15 1998 8:00am
Secretary of State

PROFIT CORPORATION ANNUAL REPORT 1998		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # **P95000043362 (9)**

1. Corporation Name
K & A UNITED INC

Principal Place of Business

**6310 FOREST HILL BLVD.
GREENACRES FL 33415
US**

Mailing Address

**4325 S MARY CIRCLE
PALM BEACH GARDENS FL 33410**

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

06/06/1995

4. FEI Number

65-0582337

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 owes or has paid the current year Intangible
Personal Property Tax due June 30. ☐ Yes ☐ No

2. Principal Place of Business

21 Suite, Apt. #, etc.

22 City & State

23 Zip Country

24 Zip Country

2a. Mailing Address

26 Suite, Apt. #, etc.

27 City & State

28 Zip Country

29 Zip Country

9. Name and Address of Current Registered Agent

**SULAIMAN, HAROON
4325 S MARY CIRCLE
PALM BEACH GARDENS FL 33410**

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

Signature typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

TITLE ☐ DELETE

NAME **D**
SULAIMAN, HAROON
STREET ADDRESS **4325 S MARY CIR**
CITY - ST - ZIP **PALM BEACH GARDENS FL 33410**

TITLE ☐ DELETE

NAME **D**
SULAIMAN, AZIZA
STREET ADDRESS **4325 S MARY CIR**
CITY - ST - ZIP **PALM BEACH GARDENS FL 33410**

TITLE ☐ DELETE

NAME **D**
ALIKHAN, MASOOD
STREET ADDRESS **13 MIDWAY CT**
CITY - ST - ZIP **BENSENVILLE IL 60106**

TITLE ☐ DELETE

NAME **D**
KHAN, AYESHA
STREET ADDRESS **13 MIDWAY CT**
CITY - ST - ZIP **BENSENVILLE IL 60106**

TITLE ☐ DELETE

NAME **D**
AHMED, KAZI
STREET ADDRESS **4339 ROYAL BANYAN WAY**
CITY - ST - ZIP **LAKEWORTH FL 33461**

TITLE ☐ DELETE

NAME **D**
AHMED, KAUSAR A
STREET ADDRESS **4339 ROYAL BANYAN WAY**
CITY - ST - ZIP **LAKEWORTH FL 33461**

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

☐ Change ☐ Addition

11 TITLE
12 NAME
13 STREET ADDRESS
14 CITY - ST - ZIP

☐ Change ☐ Addition

21 TITLE
22 NAME
23 STREET ADDRESS
24 CITY - ST - ZIP

☐ Change ☐ Addition

31 TITLE
32 NAME
33 STREET ADDRESS
34 CITY - ST - ZIP

☐ Change ☐ Addition

41 TITLE
42 NAME
43 STREET ADDRESS
44 CITY - ST - ZIP

☐ Change ☐ Addition

51 TITLE
52 NAME
53 STREET ADDRESS
54 CITY - ST - ZIP

☐ Change ☐ Addition

61 TITLE
62 NAME
63 STREET ADDRESS
64 CITY - ST - ZIP

☐ Change ☐ Addition

14. I hereby certify that the information furnished 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 changing, or on an attachment with an address.

SIGNATURE:

HAROON SULAIMAN

4/1/98 (56)965-0042

CR2E034 (10/97)