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PROFIT CORPORATION ANNUAL REPORT

1998



ELORIDA DEPARTMENT DE STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT #

P96000022796 (2)

786 AISHA INC.

Principal Place of Business

Mailing Address

106 SOUTH FLAMINGO ROAD

FILED Mar 18 1998 8:00am Secretary of State



106 SOUTH FLANINGO ROAD PEMBROKE PINES FL 33027 PEMBROKE PINES FL 33027 DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified 03/11/1996 2. Principal Place of Business 2a. Mailing Address 4. FEI Number Applied For 65-0730523 Not Applicable 21 26 Suite, Apt. #, etc. Suite, Apt. #, etc. \$8.75 Additional 5. Certificate of Status Desired Fee Required 27 22 City & State City & State \$5.00 May Be 6. Election Campaign Financing Added to Fees 23 28 Trust Fund Contribution Country 8. This corporation owes or has paid the current year Intengible Personal Property Tax due June 30. Yes X No Country 29 30 Personal Property Tax due June 30. 24 10. Name and Address of New Registered Agent 9. Name and Address of Current Registered Agent 81 KARIM, MOHAMMED H 3001 BOGOTA AVENUE Street Address (P.O. Box Number Is Not Acceptable) COOPER CITY FL 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 Agen) signature required when reinstating) ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 OFFICERS AND DIRECTORS 12. 13. DELETE Change Addition 1.1 TITLE TITLE KARIM, MOHAMMED H NAME 1.2 NAME CRZEG34 3001 BOGOTA AVENUE STREET ADDRESS 1.3 STREET ADDRESS COOPER CITY FL CITY-ST-ZIP 1.4 CITY-ST-ZIP DELETE Change Addition TITLE 2.1 TITLE MAJID, AFZAL 2.2 NAME NAME 1408 POWERLINE ROAD STREET ADDRESS 2.3 STREET ADDRESS POMPANO BEACH FL 2.4 CITY-ST-ZIP CITY-ST-ZIP DELETE Change ☐ Addition 3.1 TITLE TITLE SATTAR, ABDUL Q NAME 3.2 NAME 1408 POWERLINE ROAD STREET ADDRESS 3.3 STREET ADDRESS POMPANO BEACH FL 3.4. CITY-ST-ZIP CITY-ST-ZIP DELETE Change Addition TITLE 4.1 TITLE Majio, Shafi NAME 4. 2 NAME 1408 POWERLINE ROAD STREET ADDRESS 4.3 STREET ADDRESS POMPANO BEACH FL CITY-ST-ZIP 4.4 CITY-ST-ZIP DELETE Change Addition TETL F 5 1 TITLE 5.2 NAME NAME STREET ADDRESS 5.3 STREET ADDRESS 5.4 CITY-ST-ZIP CITY-ST-ZIP Addition DELETE Change 6.1 TITLE TITLE NAME 6.2 NAME STREET ADDRESS 6.3 STREET ADDRESS 6.4 CITY-ST-ZIP CITY-ST-ZIP

14. I 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 suppliemental 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 a attribute must be 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 attribute must be compared to execute this report as required by Chapter 607.

O CHANGE

SIGNATURE: