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

**PROFIT** 

May 18 1998 8:00am **CORPORATION** Sandra B. Mortham ANNUAL REPORT Secretary of State Secretary of State DIVISION OF CORPORATIONS 1998 DOCUMENT # P96000064010 (7) A.D.A. INVESTMENTS, CORPORATION Principal Place of Business Mailing Address 5547 27 AVE. 5547 27 AVE HIALEAH FL 33016 HIALEAH FL 33016 DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified 07/31/1996 2. Principal Place of Business 2a. Mailing Address 4. FEI Number Applied For 21 65-0710053 Not Applicable Suite, Apt. #, etc. Suite, Apt. #, etc. \$8.75 Additional 5. Certificate of Status Desired 22 Fee Regulred City & State City & State 6. Election Campaign Financing \$5.00 May Be 23 28 Trust Fund Contribution Added to Fees Zip Country Country 8. This corporation owes or has paid the current year Intangible 24 25 Personal Property Tax due June 30. MYes 29 30 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent 81 AHMAD, SYED 5547 27 AVE. 82 Street Address (P.O. Box Number is Not Acceptable) HIALEAH FL 33016 83 84 City Zip Code 65 11. Pursuant to the provisions of Sections 607.0502 and 607.1508. Florida Statules, 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. Lam familiar with, and accept the obligations of, Section 607.0505, Florida Statules. SIGNATURE Signature, type for protectioanse of regulateral agent and title if applicable (NOTE Registered Agent signature required when reinstating) (10/97) 12. OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 13. DELE TE TITLE 1.1 TITLE ☐ Change \_\_\_ Addition AHMAD, SYED NAME 1.2 NAME **85**47 27 AVE. STREET ADDRESS 1.3 STREET ADORESS HIALEAH FL 33016 CITY-ST-ZIP 1.4 CITY - ST - ZIP DELETE 2.1 TITLE Change Addition DAHLAN, THOMAS NAME 2.2 NAME 5547 27 AVE. STREET ADDRESS 2.3 STREET ADDRESS HIALEAH FL 33016 CITY-ST-ZIP 2.4 CITY - ST - ZIP DELETE TITLE 3.1 TRLE Addition ANJUM, NAVEED NAME 3.2 NAME 10625 SW 112TH AVE., #306 STREET ADDRESS 3.3 STREET ADDRESS **MIAMI FL 33176** CITY-ST-ZIP 3.4. CITY - ST - ZIP DELETE TITLE Change Addition 4.1 THLE KHAN, MOHAMMAD SIDDIQ NAME 4. 2 NAME **60**52 SW 88TH STREET STREET ADDRESS 4.3 STREET ADDRESS **MIAMI FL 33156** CITY-ST-ZIP 4.4 CITY - ST - ZIP DELETE TITLE 5.1 TITLE Addition NAME 5.2 NAME STREET ADDRESS 5.3 STREET ADDRESS CITY-ST-ZIP 5.4 CITY - ST - ZIP TITLE DELETE Change Addition 6.1 TITLE NAME 6.2 NAME STREET ADDRESS 63 STREET ADDRESS CITY-ST-7IP 6 4 CITY- S1 - 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 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 trusted empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 12 or Block 13 it changed, or on an attachment with an address.

LLORIDA DEPARTMENT OF STATE

FILED