

2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P97000020776

FILED
Jul 01, 2004
Secretary of State

Entity Name: CERTIFIED EXPORTS OF MIAMI, INC.

Current Principal Place of Business:

4094 N.W. 167TH STREET
OPA LOCKA, FL 33054

New Principal Place of Business:

Current Mailing Address:

4094 N.W. 167TH STREET
OPA LOCKA, FL 33054

New Mailing Address:

FEI Number: 65-0813738

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

ALOMARI, ABDUL
1805 SANS SOULI BLVD #133
MIAMI, FL 33181 US

Name and Address of New Registered Agent:

ALOMARI, ABDUL
4094 NW 167ST
MIAMI, FL 33054 US

The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE: ABDUL ALOMARI

07/01/2004

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: ALOMARI, ABDULWAHED ALI
Address: 1805 SANS SOULI BLVD #133
City-St-Zip: HOLLYWOOD, FL 33021

Title: VPT () Delete
Name: ABURIALEH, AHMAD
Address: 8572 NW 196 TERR
City-St-Zip: MIAMI, FL 33015

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: AHMAD ABURIALEH

VP

07/01/2004

Electronic Signature of Signing Officer or Director

Date