

# 2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P99000002913

FILED  
Apr 20, 2009  
Secretary of State

Entity Name: QABA ENTERPRISE, INC.

**Current Principal Place of Business:**

8410 WEST FLAGLER STREET  
SUITE 101  
MIAMI, FL 33144

**New Principal Place of Business:**

**Current Mailing Address:**

8410 WEST FLAGLER STREET  
SUITE 101  
MIAMI, FL 33144

**New Mailing Address:**

FEI Number: 65-0887739      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )

**Name and Address of Current Registered Agent:**

QUADRI, MUHAMMAD S  
10234 SW 139 PL  
MIAMI, FL 33186      US

**Name and Address of New Registered Agent:**

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: \_\_\_\_\_

Electronic Signature of Registered Agent

\_\_\_\_\_ Date

Election Campaign Financing Trust Fund Contribution ( ).

**OFFICERS AND DIRECTORS:**

Title: PD ( ) Delete  
Name: BASHIR, ALAMGIR  
Address: 8410 W FLAGLAR STREET, #101  
City-St-Zip: MIAMI, FL 33144

Title: VD ( ) Delete  
Name: QUADRI, MUHAMMAD S  
Address: 8410 W FLAGLAR STREET, #101  
City-St-Zip: MIAMI, FL 33144

Title: SD ( ) Delete  
Name: AHMED, JAMIL  
Address: 8410 W FLAGLAR STREET  
City-St-Zip: MIAMI, FL 33144

Title: TD ( ) Delete  
Name: AHMED, MUNIR  
Address: 8410 W FLAGLER STREET, #101  
City-St-Zip: MIAMI, FL 33144

Title: TD ( ) Delete  
Name: ABID, MOHAMMED S  
Address: 8410 W FLAGLER STREET, #101  
City-St-Zip: MIAMI, FL 33144

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

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

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

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

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 exemption stated in Chapter 119, 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: ALAMGIR BASHIR

PD

04/20/2009

Electronic Signature of Signing Officer or Director

\_\_\_\_\_ Date