

2007 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
May 01, 2007 08:00 A
Secretary of State

DOCUMENT # P99000007455



1. Entity Name
M D & R ALLY COMPANY

Principal Place of Business
11373 SW 211TH STREET
MIAMI, FL 33189

Mailing Address
11373 SW 211TH STREET
MIAMI, FL 33189



04232007 No Chg-P CR2E034 (11/05)

DO NOT WRITE IN THIS SPACE

4. FEI Number
65-0897087

Applied For
Not Applicable

5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

ALLY, BIBI
186-10 SW 94TH COURT
MIAMI, FL 33157

**DO NOT WRITE
IN THIS SPACE**

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

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

(NOTE: Registered Agent signature required when reinstating)

DATE

FILE NOW!!! FEE IS \$150.00
After May 1, 2007 Fee will be \$550.00

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

10. OFFICERS AND DIRECTORS

TITLE	D
NAME	ALLY, MOHAMMED
STREET ADDRESS	16715 SW 100TH CT
CITY-ST-ZIP	MIAMI, FL 33157
TITLE	D
NAME	ALLY, BIBI
STREET ADDRESS	186-10 SW 94TH COURT
CITY-ST-ZIP	MIAMI, FL 33157
TITLE	D
NAME	ALLY, RAHAMAT
STREET ADDRESS	16715 SW 100TH CT
CITY-ST-ZIP	MIAMI, FL 33157
TITLE	D
NAME	ALLY, ASLIM RAFI
STREET ADDRESS	186-10 SW 94TH COURT
CITY-ST-ZIP	MIAMI, FL 33157
TITLE	D
NAME	SAIRBANO, ALLY
STREET ADDRESS	16715 SW 100TH CT
CITY-ST-ZIP	MIAMI, FL 33157
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

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05/18/07-80061-009 150.00

**DO NOT WRITE
IN THIS SPACE**

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

Sairbano Ally

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

04/24/07

Date

305-278-1152

Daytime Phone #