## 2008 FOR PROFIT CORPORATION ANNUAL REPORT

SIGNATURE

## FILED DOCUMENT # P99000043202 Jul 18, 2008 08:00 AM Secretary of State 1. Entity Name RAOUF, INC. Principal Place of Business Mailing Address 901 E 10TH AVENUE 2124 S.W. 185 AVENUE MIRAMAR, FL 33029 HIALEAH, FL 33010 07142008 No Chg-P CR2E034 (11/05) DO NOT WRITE IN THIS SPACE Applied For 4. FEI Number 65-0936220 Not Applicable \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent MALIK, WAGAS DO NOT WRITE 2124 S.W. 185 AVENUE MIRAMAR, FL 33029 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. U000000955661 07/18/08<u>-</u>80006-025 Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) FILE NOW!!! FEE IS \$150.00 9. Election Campaign Financing \$5.00 May Be In accordance with s. 607.193(2)(b), F.S., the $\Box$ Trust Fund Contribution Added to Fees corporation did not receive the prior notice. Due by September 12, 2008 OFFICERS AND DIRECTORS 10. TITLE BORREO, MARTHA NAME STREET ADDRESS 3520 SW 88TH COURT MIAMI, FL 33165 CITY-ST-ZIP NAME MALIK, WAGAS STREET ADDRESS 2124 S.W. 185 AVENUE CITY-ST-ZIP MIRAMAR, FL 33029 THILE NAME STREET ADDRESS DO NOT WRITE CITY-ST-ZIP IN THIS SPACE TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CiTY-ST-ZiP 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.

RE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR