

2007 FOR PROFIT CORPORATION ANNUAL REPORT (AR)

FILED
Mar 21, 2007 8:00 am
Secretary of State

03-21-2007 90041 025 ***158.75

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1. Entity Name

A.O.N. INTERNATIONAL, INC.



Principal Place of Business

6951 NORTHWEST 109TH AVENUE
MIAMI FL 33178

Mailing Address

6951 NORTHWEST 109TH AVENUE
MIAMI FL 33178



2. Principal Place of Business - No P.O. Box #
8901 N.W. 35th LANE

3. Mailing Address
8901 N.W. 35th LANE

Suite, Apt. #, etc.

Suite #201

Suite, Apt. #, etc.

Suite #201

City & State

MIAMI FLORIDA

City & State

MIAMI FLORIDA

Zip

33172

Country

USA

Zip

33172

Country

USA

1st MOORE

CR2E034 (10/06)

4. FEI Number

65-0947875

Applied For

Not Applicable

5. Certificate of Status Desired



\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

AHMAD, SHAHABUDEEN
6951 NW 109TH AVE
MIAMI FL 33178

7. Name and Address of New Registered Agent

Name

Ahmad, Shahabudeen

Street Address (P.O. Box Number is Not Acceptable)

8901 N.W. 35th LANE Suite #201

City

MIAMI

FL

Zip Code

33172

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

Shahabudeen Ahmad Shahabudeen Ahmad

3/12/07

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

Make Check Payable to Florida Department of State

9. Election Campaign Financing
Trust Fund Contribution. ☐

**\$5.00 May Be
Added to Fees**

10. OFFICERS AND DIRECTORS

TITLE PSTD
NAME AHMAD, SHAHABUDEEN ☐ Delete
STREET ADDRESS 6951 NORTHWEST 109TH AVENUE
CITY-ST-ZIP MIAMI FL 33178

TITLE VD
NAME AHMAD, DOMINIQUE ☐ Delete
STREET ADDRESS 6951 NORTHWEST 109TH AVENUE
CITY-ST-ZIP MIAMI FL 33178

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE PSTD ☒ Change ☐ Addition
NAME AHMAD, Shahabudeen
STREET ADDRESS 8901 NW 35th LANE Suite #201
CITY-ST-ZIP MIAMI FL 33172

TITLE VD ☒ Change ☐ Addition
NAME AHMAD, Dominique
STREET ADDRESS 8901 NW 35th LANE Suite #201
CITY-ST-ZIP MIAMI FL 33172

TITLE DIRECTOR ☐ Change ☒ Addition
NAME KEITH.A.S. WISHART
STREET ADDRESS 8901 NW 35th LANE Suite #201
CITY-ST-ZIP MIAMI FL 33172

TITLE DIRECTOR ☐ Change ☒ Addition
NAME ADAM.A. AHAMAD
STREET ADDRESS 8901 NW 35th LANE Suite #201
CITY-ST-ZIP MIAMI FL 33172

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
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 Section 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:

Shahabudeen Ahmad Shahabudeen Ahmad

3/12/07

3054375000

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #