2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT # P99000094644

I. Entity Name AHMAD 2000, INC.



FILED
May 04, 2005 08:00 AM
Secretary of State

Principal Place of Business 27801 SOUTH DIXIE HWY

MIAMI, FL 33032

Mailing Address

27801 SOUTH DIXIE HWY MIAMI, FL 33032



DO NOT WRITE IN THIS SPACE

02022005 No Chg-P

CR2E034 (10/03)

4. FEI Number 65-1095801 Applied For Not Applicate

5. Certificate of Status Desired

\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

HASSAN, AZZAM 27801 SOUTH DIXIE HWY MIAMI, FL 33032

the obligations of registered agent.

DO NOT WRITE IN THIS SPACE

SIGNATURE.					
	Signature, typed or printed name of registered agent and title	f applicable. (NOTE, Registered	Agent signature required when reinstating)	DATE	
FIL After M	E NOW!!! FEE IS \$150.00 ay 1, 2005 Fee will be \$550.00	Election Campaign Finan- Trust Fund Contribution.	scing \$5.00 May Be Added to Fees		
10. OFFICERS AND DIRECTORS				1	
TITLE NAME STREET ADDRESS DITY-ST-ZIP	PTVS HASSAN, AZZAM 27801 SOUTH DIXIE HWY MIAMI, FL 33032				
TITLE NAME STREET ADDRESS DITY-ST-ZIP	D HASSAN, AZZAM 27801 SOUTH DIXIE HWY MIAMI, FL 33032			1000001360343 15/05/05-80050-016 150.00	
Title Name Street Address Sity-St-Zip			DO	NOT WRITE	
TTLE NAME STREET ADDRESS STY-ST-ZIP			IN	THIS SPACE	
ttle Name Street Address 11ty-St-Zip					
Title Name Street address City-St-Zip					

3. 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

12. I hereby certify that the information supplied with this filling does not qualify 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 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 in changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: A22 A
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR E

22AM WASSAN

4-11-05

(305) 245-3375