

FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

3/2

FILED
Apr 27, 2001 8:00 am
Secretary of State

03-21-2001 90079 037 ***150.00

PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE
Katherine Harris
Secretary of State
DIVISION OF CORPORATIONS

2001

DOCUMENT # P99000094988

1. Corporation Name
ALFO & ZEK, Inc

Principal Place of Business Mailing Address
9507 SW 148th Ave 9507 S.W 148th Ave.
MIAMI, FL 33196 MIAMI, FL 33196

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

21. Principal Place of Business	26. Mailing Address	4. FEI Number 65-0957529	Applied For <input type="checkbox"/> Not Applicable
22. Suite, Apt. #, etc	27. Suite, Apt. #, etc	5. Certificate of Status Desired	\$8.75 Additional Fee Required
23. City & State	28. City & State	6. Election Campaign Financing Trust Fund Contribution	\$5.00 May Be Added to Fees
24. Zip	29. Zip	8. This corporation owes the current year intangible Personal Property Tax	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No

9. Name and Address of Current Registered Agent Spiegel & Utrera P.A. 343 Almeria Ave CORAL GABLES, FL 33134	10. Name and Address of New Registered Agent 81 Name: Ali A Fouladi 82 Street Address (P.O. Box Number is Not Acceptable): 9507 SW 148 Ave 83 84 City: MIAMI FL 85 Zip Code: 33196
---	--

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent and I am familiar with and accept the obligations of Section 607.0505, Florida Statutes.

SIGNATURE: *[Signature]* (NOTE: Registered Agent signature required when transferring) 04/04/01

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE: PD	<input type="checkbox"/> DELETE	1.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME: Ali A Fouladi		1.2 NAME	
STREET ADDRESS: 9507 SW 148 Ave		1.3 STREET ADDRESS	
CITY, ST, ZIP: MIAMI, FL 33196		1.4 CITY, ST, ZIP	
TITLE:	<input type="checkbox"/> DELETE	2.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME: Zeyda Kazemzadeh		2.2 NAME	
STREET ADDRESS: 9507 S.W. 148 AVE		2.3 STREET ADDRESS	
CITY, ST, ZIP: MIAMI, FL 33196		2.4 CITY, ST, ZIP	
TITLE:	<input type="checkbox"/> DELETE	3.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME:		3.2 NAME	
STREET ADDRESS:		3.3 STREET ADDRESS	
CITY, ST, ZIP:		3.4 CITY, ST, ZIP	
TITLE:	<input type="checkbox"/> DELETE	4.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME:		4.2 NAME	
STREET ADDRESS:		4.3 STREET ADDRESS	
CITY, ST, ZIP:		4.4 CITY, ST, ZIP	
TITLE:	<input type="checkbox"/> DELETE	5.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME:		5.2 NAME	
STREET ADDRESS:		5.3 STREET ADDRESS	
CITY, ST, ZIP:		5.4 CITY, ST, ZIP	
TITLE:	<input type="checkbox"/> DELETE	6.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME:		6.2 NAME	
STREET ADDRESS:		6.3 STREET ADDRESS	
CITY, ST, ZIP:		6.4 CITY, ST, ZIP	

14. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual 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 12 or Block 13 if changed, or on an attachment with an address, with all other like empowered

SIGNATURE: *[Signature]* 03/12/01