

FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

**PROFIT
CORPORATION
ANNUAL REPORT
1996**



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # S19185 (5)

1. Corporation Name

AYSHA CORPORATION



Principal Place of Business

**13901 NW 67TH AVE
MIAMI LAKES FL 33014**

Mailing Address

**13901 NW 67TH AVE
MIAMI LAKES FL 33014**

2. Principal Place of Business

21 Suite, Apt. #, etc.

22 City & State

23 Zip Country

24 25

2a. Mailing Address

26 **12505 West Dixie Hwy.**

27 Suite, Apt. #, etc.

28 **NORTH MIAMI FL**

29 **33161** 30 **U.S.A.**

3. Date Incorporated or Qualified
12/13/1990

3a. Date of Last Report
02/01/1995

4. FEI Number
65-0242293

Applied For
Not Applicable

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

6. Election Campaign Financing Trust Fund Contribution ☐ **\$5.00 May Be Added to Fees**

8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes ☐ Yes ☒ No

9. Name and Address of Current Registered Agent

**BERNSTEIN, JEFFREY A.
100 N BISCAYNE BLVD SUITE 1707
MIAMI FL 33132**

10. Name and Address of New Registered Agent

81 N. **ABDUL HAMEED**

82 Street Address (P.O. Box Number is not Acceptable)

83 **12505 W DIXIE HWY**

84 City **North MIAMI**

85 FL 86 Zip Code **33161**

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 board of directors of the corporation. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Sections 607.0502 and 607.1508, Florida Statutes.

SIGNATURE **ABDUL HAMEED**

(NOTE: Registered agent signature required when reinstating)

DATE **3-8-96**

12. OFFICERS AND DIRECTORS

1. NAME **DPT PARACHA, IMTIAZ**
2. STREET ADDRESS **13901 NW 67TH AVE**
3. CITY-ST-ZIP **MIAMI LAKES FL**

4. NAME ☐ DELETE

5. NAME ☐ DELETE

6. NAME ☐ DELETE

7. NAME ☐ DELETE

8. NAME ☐ DELETE

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1. 1. TITLE ☐ Change ☐ Addition

2. NAME

3. STREET ADDRESS

4. CITY-ST-ZIP

5. 1. TITLE ☐ Change ☐ Addition

2. NAME

3. STREET ADDRESS

4. CITY-ST-ZIP

5. 1. TITLE ☐ Change ☐ Addition

2. NAME

3. STREET ADDRESS

4. CITY-ST-ZIP

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4. CITY-ST-ZIP

5. 1. TITLE ☐ Change ☐ Addition

2. NAME

3. STREET ADDRESS

4. CITY-ST-ZIP

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), 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 or changed or on an attachment with an address.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Imtiaz A. Paracha 1/29/96

Date

Daytime Phone #

305-895-2937

CR2E034 (12/95)