

2023 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N05000004421

Entity Name: CAIR FLORIDA HOLDING COMPANY, INC.**Current Principal Place of Business:**9000 NW 44TH STREET
SUITE 200
SUNRISE, FL 33351**Current Mailing Address:**8076 N 56TH ST.
TAMPA, FL 33617 US**FEI Number:** 20-2782775**Certificate of Status Desired:** Yes**Name and Address of Current Registered Agent:**ALHAMZAWI, KHALED
8076 N 56TH ST.
TAMPA, FL 33617 US*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.***SIGNATURE:** KHALED ALHAMZAWI**03/10/2023**

Electronic Signature of Registered Agent

Date

Officer/Director Detail :

Title	PRESIDENT	Title	DIRECTOR
Name	ALHAMZAWI , KHALED	Name	ABDUR-RAHMAN, ZAID
Address	9000 NW 44TH STREET SUITE 200	Address	9000 NW 44TH STREET SUITE 200
City-State-Zip:	SUNRISE 33351	City-State-Zip:	SUNRISE FL 33351
Title	TREASURER	Title	VP
Name	ABBARA, MUHAMMAD	Name	ABDURRASHID, BILAL
Address	9000 NW 44TH STREET SUITE 200	Address	9000 NW 44TH STREET SUITE 200
City-State-Zip:	SUNRISE FL 33351	City-State-Zip:	SUNRISE FL 33351
Title	DIRECTOR	Title	DIRECTOR
Name	MALIK, KAUKIB	Name	ALI, SABA
Address	9000 NW 44TH STREET SUITE 200	Address	9000 NW 44TH STREET SUITE 200
City-State-Zip:	SUNRISE FL 33351	City-State-Zip:	SUNRISE FL 33351
Title	DIRECTOR	Title	DIRECTOR
Name	HAMOUI, OMAR DR.	Name	SHAHOUT, MOHAMED DR.
Address	8076 N 56TH ST.	Address	8076 N 56TH ST.
City-State-Zip:	TAMPA FL 33617	City-State-Zip:	TAMPA FL 33617

I hereby certify that the information indicated on this report or supplemental report is true and accurate and that my electronic 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 617, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

SIGNATURE: KHALED ALHAMZAWI**PRESIDENT****03/10/2023**

Electronic Signature of Signing Officer/Director Detail

Date