2016 FLORIDA PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P12000024544

Entity Name: AB FLORIDA GROUP (WHISPERING ISLES), INC.

FILED Apr 14, 2016 **Secretary of State** CC4200634987

Current Principal Place of Business:

ALAJLAN RESIDENCES, HITTEEN STREET C/O IMRAN SALAHUDDIN HITTEEN, RIYADH 11541

Current Mailing Address:

2 N. LASALLE ST. **SUITE 1300** CICAGO, IL 60602

FEI Number: 33-1226306 Certificate of Status Desired: No

Name and Address of Current Registered Agent:

CORPORATION SERVICE COMPANY 1201 HAYS STREET TALLAHASSEE, FL 32301-2525 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:

Address

Electronic Signature of Registered Agent Date

Officer/Director Detail:

PRESIDENT AND DIRECTOR Title Title **SECRETARY**

BIN ABDULAZIZ ALAJLAN, AJLAN Name Name SALAHUDDIN, IMRAN

Address ALAJLAN RESIDENCES, HITTEEN Address ALAJLAN RESIDENCES, HITTEEN

STREET STREET

C/O IMRAN SALAHUDDIN C/O IMRAN SALAHUDDIN

City-State-Zip: HITTEEN 11541 City-State-Zip: HITTEEN 11541

Title **DIRECTOR** Title **DIRECTOR**

Name BIN ABDULAZIZ ALAJLAN, Name BIN ABDULAZIZ ALAJLAN, FAHAD MOHAMMAD

Address ALAJLAN RESIDENCES, HITTEEN ALAJLAN RESIDENCES, HITTEEN

STREET STREET C/O IMRAN SALAHUDDIN

C/O IMRAN SALAHUDDIN

HITTEEN 11541 City-State-Zip: HITTEEN 11541 City-State-Zip:

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 607, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

Electronic Signature of Signing Officer/Director Detail