

2026 MAY 27 PM 1:54

**General Information**DIVISION OF ELECTIONS  
TALLAHASSEE, FL

Name: Mr IMTIAZ AHMAD MOHAMMAD

| Organization | Suborganization | Title |
|--------------|-----------------|-------|
| N/A          |                 |       |

**CANDIDATE FOR**

| Position             | Agency Name          | Position sought or held |
|----------------------|----------------------|-------------------------|
| State Representative | state representative | district 103            |

**Net Worth**My Net Worth as of December 31, 2025 was \$ 500,000.00

For Qualifying Purposes Only

## 2025 Form 6 - Full and Public Disclosure of Financial Interests

### Assets

Household goods and personal effects may be reported in a lump sum if their aggregate value exceeds \$1,000. This category includes any of the following, if not held for investment purposes: jewelry; collections of stamps, guns, and numismatic items; art objects; household equipment and furnishings; clothing; other household items; and vehicles for personal use.

The aggregate value of my household goods and personal effect is \$ 35,000.00.

#### ASSETS INDIVIDUALLY VALUED AT OVER \$1,000:

| Description of Asset               | Value of Asset |
|------------------------------------|----------------|
| TASTE OF PAKISTAN USA INC          | \$ 100,000.00  |
| HALAL FOODS CAFE INC               | \$ 75,000.00   |
| THE BEAUTY CAFE INC                | \$ 50,000.00   |
| BEAUTY CAFE SALON MIAMI INC        | \$ 175,000.00  |
| BEAUTY CAFE SALON II INC           | \$ 100,000.00  |
| BOLLYWOOD SALON USA INC            | \$ 75,000.00   |
| NESHAZ BEAUTY CAFE SALON PINES INC | \$ 185,000.00  |
| BEAUTY CAFE SALON AVENTURA INC     | \$ 65,000.00   |
| BEAUTY CAFE SALON SAWGRASS INC     | \$ 75,000.00   |
| BEAUTY CAFE WESTLAND INC           | \$ 50,000.00   |

# 2025 Form 6 - Full and Public Disclosure of Financial Interests

## Liabilities

LIABILITIES IN EXCESS OF \$1,000:

| Name of Creditor           | Address of Creditor                     | Amount of Liability |
|----------------------------|-----------------------------------------|---------------------|
| AMERICAN CREDIT ACCEPTANCE | PO BOX 204531 DALLAS TX 75320           | \$ 25,467.68        |
| SHUMAILA                   | 5850 NW 183RD ST HIALEAH FL 33015       | \$ 75,000.00        |
| JAVERIA FAROOQUI           | 1630 W 49TH ST HIALEAH FL 33012         | \$ 100,000.00       |
| MEHREEN ASIF               | 11445 WEST OAKLAND PARK FL 33323        | \$ 65,000.00        |
| SHEHRAZ PUNJANI            | 1411 N PALM AVE PEMBROKE PINES FL 33026 | \$ 45,000.00        |

JOINT AND SEVERAL LIABILITIES NOT REPORTED ABOVE:

| Name of Creditor | Address of Creditor | Amount of Liability |
|------------------|---------------------|---------------------|
| N/A              |                     |                     |

## 2025 Form 6 - Full and Public Disclosure of Financial Interests

### Income

Identify each separate source and amount of income which exceeded \$1,000 during the year, including secondary sources of income. Or attach a complete copy of your 2025 federal income tax return, including all W2s, schedules, and attachments. Please redact any social security or account numbers before attaching your returns, as the law requires these documents be posted to the Commission's website.

☐ I elect to file a copy of my 2025 federal income tax return and all W2s, schedules, and attachments.

#### PRIMARY SOURCES OF INCOME:

| Name of Source of Income Exceeding \$1,000 | Address of Source of Income              | Amount       |
|--------------------------------------------|------------------------------------------|--------------|
| BEAUTY CAFE SALON MIAMI INC                | 8227 WEST FLAGLER MIAMI FL 33144         | \$ 24,000.00 |
| BEAUTY CAFE SALON II INC                   | 14574 SW 8TH STREET MIAMI FL 33181       | \$ 18,000.00 |
| BOLLYWOOD SALON USA INC                    | 5850 NW 183RD STREET HIALEAH 33015       | \$ 24,000.00 |
| NESHA AZ BEAUTY CAFE SALON PINES INC       | 10550 PINES BLVD PEMBROKE PINES FL 33026 | \$ 12,000.00 |

#### SECONDARY SOURCES OF INCOME (Major customers, clients, etc. of businesses owned by reporting person):

| Name of Business Entity | Name of Major Sources of Business' Income | Address of Source | Principal Business Activity of Source |
|-------------------------|-------------------------------------------|-------------------|---------------------------------------|
| N/A                     |                                           |                   |                                       |

### Interests in Specified Businesses

#### Business Entity # 1

N/A

**Signature of Reporting Official or Candidate**

Under the penalties of perjury, I declare that I have read the foregoing Form 6 and that the facts stated in it are true.

**IMTIAZ AHMAD MOHAMMAD**

Digitally signed: 05/25/2026

For Qualifying  
purposes Only