## 2004 NOT-FOR-PROFIT CORPORATION

## Apr 22, 2004 8:00 am Secretary of State **ANNUAL REPORT (AR)** DOCUMENT # N00000000041 1. Entity Name 04-22-2004 90046 018 \*\*\*\*70.00 ERITRO-AMERICAN SOCIETY OF TAMPA BAY, INC. Principal Place of Business Mailing Address 1562 15TH STREET SOUTH ST. PETERSBURG FL 33705 1562 15TH STREET SOUTH ST. PETERSBURG FL 33705 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. MOORE CR2E037 (11/03) City & State City & State 4. FEI Number Applied For 59-3609078 Not Applicable Zip Country Country Zip \$8.75 Additional 5. Certificate of Status Desired 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Name DESTA, TECLEAB T Street Address (P.O. Box Number is Not Acceptable) 1562 15TH STREET SOUTH ST. PETERSBURG FL 33705 Zip Code FL 8. 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. † am familiar with, and accept the obligations of registered agent. SIGNATURE Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) FILE NOW: FEE IS \$61.25 9. Election Campaign Financing \$5.00 May Be Make Check Payable to Trust Fund Contribution. Due By May 1, 2004 Added to Fees Florida Department of State ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10 OFFICERS AND DIRECTORS 10. 11. Delete Change TITLE TITLE ☐ Addition DESTA, TECLEAB T. DESTA, TEGLEAB T NAME NAME 1562 15TH ST. S STREET ADDRESS STREET ADDRESS Salut PETERSBURG, FL 33705. SAINT PETERSBURG FL 33705 CITY-ST-ZIP CITY-ST-7IP Delete Change TITLE TITLE ☐ Addition DENSIEW, NAIZGHI T. DENSIEW, NAIZGHI T NAME NAME 6708 MIRROR LAKE AVE 3920 W. STATE St. STREET ADDRESS STREET ADDRESS TAMPA FL 33634 TAMPA, FL 33609. CITY-ST-ZIP CITY-ST-7IP Delete Change TITLE TITLE ☐ Addition TASGHODOM, MARCOS E. ASGHODOM, MARCOS E NAME NAME 4602 N. JAMAICA ST 4602 N. JANAICA St. STREET ADDRESS STREET ADDRESS **TAMPA FL 33614** CITY-ST-ZIP CITY-ST-ZIP TAMPA, FL 33614 Delete Change TITLE TITLE ☐ Addition MUHUTZ, GHEBRIHIWET GMESRIHIWET, MHUTZ NAME NAME 202 N. HABANA STREET ADDRESS STREET ADDRESS 202 N. HABANA **TAMPA FL 33609** CITY-ST-ZIP CITY-ST-7IP TAMPA, FL 33609. ☐ Change TITLE ☐ Delete TITLE ☐ Addition DRAR, GHEBRESLASIE NAME NAME 3218 W. BEACH ST STREET ADDRESS STREET ADDRESS TAMPA FL 33607 CITY-ST-ZIE CITY-ST-ZIP Delete TITLE ☐ Change Addition TITLE ASGHEDOM, ESTIFANOS

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 report or supplemental 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 617. Florida Statutes; and that my name appears in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

NAME

STREET ADDRESS

CITY-ST-ZIP

312 NORTH HABANA

**TAMPA FL 33609** 

NAME

STREET ADDRESS

CITY-ST-ZIP

IG OFFICER OR DIRECTOR

FILED

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