2004 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
May 01, 2004
Secretary of State

DOCUMENT# P03000056712

Entity Name: OAKS MALL CHERON, INC.

Current Principal Place of Business:

2020 WELLS RD.
17-I
ORANGE PARK, FL 32073

New Principal Place of Business:

1857 WELLS RD
230
ORANGE PARK, FL 32073

Current Mailing Address:

2020 WELLS RD UNIT
17-I
ORANGE PARK, FL 32073

New Mailing Address:

1857 WELLS RD
230
ORANGE PARK, FL 32073

FEI Number: **FEI Number Applied For ( )** **FEI Number Not Applicable (X)** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

KHALID, MUGHAL
2020 WELLS RD
UNI 17-I
ORANGE PARK, FL 32073

Name and Address of New Registered Agent:

KHALID, MUGHAL
1857 WELLS RD.
230
ORANGE PARK, FL 32073

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: KHALID MUGHAL 05/01/2004
Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ( ).

OFFICERS AND DIRECTORS:

Title: PD ( ) Delete
Name: KHALID, MUGHAL
Address: 2020 WELLS RD UNIT 17-I
City-St-Zip: ORANGE PARK, FL 32073

Title: VD ( ) Delete
Name: ADEL, SALEM
Address: 2020 WELLS RD UIT 17-I
City-St-Zip: ORANGE PARK, FL 32073

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change ( ) Addition
Name: KHALID, MUGHAL
Address: 1857 WELLS RD SUITE # 230
City-St-Zip: ORANGE PARK, FL 32073

Title: VD (X) Change ( ) Addition
Name: ADEL, SALEM
Address: 1857 WELLS RD SUITE # 230
City-St-Zip: ORANGE PARK, FL 32073

I hereby certify that the information supplied with this filing does not qualify for the 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 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 an address, with all other like empowered.

SIGNATURE: KHALID MUGHAL PD 05/01/2004
Electronic Signature of Signing Officer or Director Date