

# 2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P08000050233

FILED  
Apr 30, 2009  
Secretary of State

Entity Name: MEDITERRANEAN CORNER, INC.

**Current Principal Place of Business:**

3277 OXFORD DRIVE  
KISSIMMEE, FL 34746 OS

**New Principal Place of Business:**

**Current Mailing Address:**

3277 OXFORD DRIVE  
KISSIMMEE, FL 34746 OS

**New Mailing Address:**

FEI Number: 26-2660561

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

**Name and Address of Current Registered Agent:**

SBAITI, KHALID  
3277 OXFORD DRIVE  
KISSIMMEE, FL 34746 US

**Name and Address of New Registered Agent:**

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: \_\_\_\_\_

Electronic Signature of Registered Agent

\_\_\_\_\_ Date

Election Campaign Financing Trust Fund Contribution ( ).

**OFFICERS AND DIRECTORS:**

Title: P ( ) Delete  
Name: SBAITI, KHALID  
Address: 3277 OXFORD DRIVE  
City-St-Zip: KISSIMMEE, FL 34746 OS

Title: VP (X) Delete  
Name: TOUMI, SANAE  
Address: 3277 OXFORD DRIVE  
City-St-Zip: KISSIMMEE, FL 34746 OS

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, 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 SBAITI

P

04/30/2009

Electronic Signature of Signing Officer or Director

\_\_\_\_\_ Date