

2008 FOR PROFIT CORPORATION AMENDED ANNUAL REPORT

**FILED
Sep 16, 2008
Secretary of State**

DOCUMENT# S50066

Entity Name: ATAA, INC.

Current Principal Place of Business:

5205 E FOWLER AVE
TAMPA, FL 33617 US

New Principal Place of Business:

Current Mailing Address:

5205 E FOWLER AVE
TAMPA, FL 33617 US

New Mailing Address:

FEI Number: 59-3063751 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

KADIR, AKHTAR
5205 E. FOWLER AVE.
TAMPA, FL 33617 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

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: KADIR, AKHTAR
Address: 14928 LAKE FOREST DR
City-St-Zip: LUTZ, FL

Title: V () Delete
Name: TASNEEM, KADIR
Address: 14928 LAKE FOREST DR
City-St-Zip: LUTZ, FL

Title: V (X) Delete
Name: KADIR, ALI A
Address: 14928 LAKE FOREST DRIVE
City-St-Zip: LUTZ, FL 33549

Title: V (X) Delete
Name: KADIR, ABDUL-MALIK A
Address: 14928 LAKE FOREST DR
City-St-Zip: LUTZ, FL 33549

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: KADIR, AKHTAR
Address: 10516 MARTINIQUE ISLE DR
City-St-Zip: TAMPA, FL 33647

Title: V (X) Change () Addition
Name: TASNEEM, KADIR
Address: 10516 MARTINIQUE ISLE DR
City-St-Zip: TAMPA, FL 33647

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: AKHTAR KADIR

P

09/16/2008

Electronic Signature of Signing Officer or Director

_____ Date