

2011 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P08000051387

FILED
May 01, 2011
Secretary of State

Entity Name: T.H.O.F. INC.

Current Principal Place of Business:

110 EAST BYRD AVENUE
BONIFAY, FL 32425

New Principal Place of Business:

4012 W. 23RD. AVE.
PANAMA CITY, FL 32405

Current Mailing Address:

110 EAST BYRD AVENUE
BONIFAY, FL 32425

New Mailing Address:

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

Name and Address of Current Registered Agent:

ISMAIL, AHMAD T
110 E. BYRD AVE.
BONIFAY, FL 32425 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: PD
Name: ISMAIL, FATIMA S
Address: 110 EAST BYRD AVENUE
City-St-Zip: BONIFAY, FL 32425

Title: VD
Name: ISMAIL, HUMZA
Address: 110 EAST BYRD AVENUE
City-St-Zip: BONIFAY, FL 32425

Title: SD
Name: ISMAIL, OSAMA
Address: 110 EAST BYRD AVENUE
City-St-Zip: BONIFAY, FL 32425

Title: TD
Name: ISMAIL, AHMAD T
Address: 110 EAST BYRD AVENUE
City-St-Zip: BONIFAY, FL 32425

Title: D
Name: ISMAIL, AHMAD T
Address: 110 E. BYRD AVE.
City-St-Zip: BONIFAY, FL 32425

I hereby 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 all other like empowered.

SIGNATURE: AHMAD ISMAIL

P

05/01/2011

_____ Electronic Signature of Signing Officer or Director

_____ Date