## 2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# N99000000906

Entity Name: ALKHAIRAT, INC.

FILED Apr 30, 2009 Secretary of State

0	nin ain al Bla	of Ducinosa.	N B 1	single Place of Business		
Current Principal Place of Business:				New Principal Place of Business:		
1904A W KENNEDY BLVD. TAMPA, FL 33606  Current Mailing Address:				1307 W. NORTH B ST. TAMPA, FL 33606  New Mailing Address:		
			New Mail			
5701 PALM RIVER RD, TAMPA, FL 33619				1307 W. NORTH B ST. TAMPA, FL 33606		
FEI Number: 59-3723096 FEI Number Applied For ( )		FEI Number Not Applicable ( ) Certificate of Status Desired (X)				
Name and	Address of C	urrent Registered Agent:	Name and	d Address of New Registered Agent:		
	MAHMOUD MRIVER RD. _ 33619 US	8				
The above in the State	named entity s of Florida.	submits this statement for the p	ourpose of changing	its registered office or registered agent, or bo		
SIGNATUR	RE:					
	Electron	ic Signature of Registered Age	ent	Date		
OFFICERS	S AND DIREC	TORS:	ADDITIO	NS/CHANGES TO OFFICERS AND DIRECT		
Title: Name: Address: City-St-Zip:	D () KAHEEL, MAHN 5701 PALM RIV TAMPA, FL 336	ER RD	Title: Name: Address: City-St-Zip:	()Change ()Addition		
Title: Name: Address: City-St-Zip:	YASSIN, AHMA 4209 1/2 WEST TAMPA, FL 336	NORTH A ST#1 609	Title: Name: Address: City-St-Zip:			
Title: Name: Address: City-St-Zip:	S () KHOSROWABA 11415 CAPTIVA RIVERVIEW, FI	ADR.	Title: Name: Address: City-St-Zip:	S (X) Change () Addition HAFEZ, MUNIR 1208 E KENNEDY BLVD #1210 TAMPA, FL 33602		
Title: Name: Address: City-St-Zip:	O () AHMED, MOHA 4310 W. NORTI TAMPA, FL 336	H B. ST	Title: Name: Address: City-St-Zip:	O (X) Change ( ) Addition ABDEL-JALEEL, AL-INSHIRAH M 3827 VOLUSIA PLACE TAMPA, FL 33637		
Title: Name: Address: City-St-Zip:	O () ANAJI, JAMAL P.O. BOX 2131 BRANDON, FL	Delete 33509	Title: Name: Address: City-St-Zip:	O (X) Change ( ) Addition ELSHEIKH, MUHAMMED 2308 W. GETTON AVE TAMPA, FL 33629		
Title: Name: Address: City-St-Zip:	O () GARBAJ, SALA 13123 KINGS O GIBSONTON, F		Title: Name: Address: City-St-Zip:	()Change ()Addition		

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 617, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: MAHMOUD KAHEEL D 04/30/2009