

# 2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P00000008422

FILED  
Mar 21, 2005  
Secretary of State

Entity Name: MAVERICK MANAGEMENT SERVICES, INC.

## Current Principal Place of Business:

43824 US HWY 27  
DAVENPORT, FL 33837

## New Principal Place of Business:

P O BOX 691777  
ORLANDO, FL 32869

## Current Mailing Address:

43824 US HWY 27  
DAVENPORT, FL 33837

## New Mailing Address:

P O BOX 691777  
ORLANDO, FL 32869

FEI Number: 59-3620366

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

HAROON, KHAWAJA  
43824 US HWY 27  
DAVENPORT, FL 33837 US

## Name and Address of New Registered Agent:

HAROON, KHAWAJA  
P O BOX 691777  
ORLANDO, FL 32869 US

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: HAROON KHAWAJA

03/21/2005

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: D ( ) Delete  
Name: KHAWAJA, TARIQ L  
Address: 43824 US HWY 27  
City-St-Zip: DAVENPORT, FL 33837

Title: PST ( ) Delete  
Name: KHAWAJA, HAROON  
Address: 43824 US HWY 27  
City-St-Zip: DAVENPORT, FL 33837

Title: D ( ) Delete  
Name: KHAWAJA, KHURRUM  
Address: 43824 US HWY 27  
City-St-Zip: DAVENPORT, FL 33837

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: D (X) Change ( ) Addition  
Name: KHAWAJA, TARIQ L  
Address: P O BOX 691777  
City-St-Zip: ORLANDO, FL 32869

Title: PST (X) Change ( ) Addition  
Name: KHAWAJA, HAROON  
Address: P O BOX 691777  
City-St-Zip: ORLANDO, FL 32869

Title: D (X) Change ( ) Addition  
Name: KHAWAJA, KHURRUM  
Address: P O BOX 691777  
City-St-Zip: ORLANDO, FL 32869

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: HAROON KHAWAJA

PST

03/21/2005

Electronic Signature of Signing Officer or Director

Date