

2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P00000008432

Entity Name: MAVERICK ESTATES, INC.

FILED
Feb 06, 2006
Secretary of State

Current Principal Place of Business:

P O BOX 691777
ORLANDO, FL 32869

New Principal Place of Business:

Current Mailing Address:

P O BOX 691777
ORLANDO, FL 32869

New Mailing Address:

FEI Number: 59-3620374

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

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

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

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

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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 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: HAROON KHAWAJA

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02/06/2006

Electronic Signature of Signing Officer or Director

Date