

# 2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P00000015074

FILED  
Mar 24, 2009  
Secretary of State

Entity Name: GULAMALI ENTERPRISES, INC.

**Current Principal Place of Business:**

4680 SOUTH ORANGEBLOSSOM TRAIL  
ORLANDO, FL 32839

**New Principal Place of Business:**

**Current Mailing Address:**

4680 SOUTH ORANGE BLOSSOM TRAIL  
ORLANDO, FL 32839

**New Mailing Address:**

FEI Number: 59-3623035

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

**Name and Address of Current Registered Agent:**

GULAMALI, AMIN  
4680 S ORANGE BLSM TRAIL  
ORLANDO, FL 32839 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: PD ( ) Delete  
Name: GULAMALI, RAMZAN  
Address: 4680 S ORANGE BLSM TRAIL  
City-St-Zip: ORLANDO, FL 32839

Title: STD ( ) Delete  
Name: GULAMALI, AMIN  
Address: 4680 S ORANGE BLSM TRAIL  
City-St-Zip: ORLANDO, FL 32839

Title: D (X) Delete  
Name: GULAMALI, ABDULALI  
Address: 4680 S. ORANGE BLSM. TR.  
City-St-Zip: ORLANDO, FL 32839

**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 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: RAMZAN GULAMALI

PD

03/24/2009

Electronic Signature of Signing Officer or Director

\_\_\_\_\_ Date