

2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT # P01000094567

1. Entity Name
CAPITAL CIRCLE PLAZA INC.



APPROVED
AND
FILED

07 APR 25 AM 11:11

SECRETARY OF STATE
TALLAHASSEE, FLORIDA



Principal Place of Business
2811-E INDUSTRIAL PLAZA DR.
TALLAHASSEE, FL 32301

Mailing Address
2811-E INDUSTRIAL PLAZA DR.
TALLAHASSEE, FL 32301

2. Principal Place of Business - No P.O. Box #

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

03302007 Chg-P CR2E034 (12/06)

4. FEI Number
01-0591694

Applied For
Not Applicable

5. Certificate of Status Desired ☐ \$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

GHAZVINI, MEHRDAD
2811-E INDUSTRIAL PLAZA DR.
TALLAHASSEE, FL 32301

Name
GHAZVINI, BEHZAD

Street Address (P.O. Box Number is Not Acceptable)
2811 E INDUSTRIAL PLAZA DRIVE

City
TALLAHASSEE

FL Zip Code
32301

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

4/24/07
DATE

FILE NOW!!! FEE IS \$150.00
After May 1, 2007 Fee will be \$550.00

9. Election Campaign Financing
Trust Fund Contribution. ☐ \$5.00 May Be
Added to Fees

10. OFFICERS AND DIRECTORS

TITLE DP
NAME GHAZVINI, HOSSEIN ☐ Delete
STREET ADDRESS 4515 HIGH RD.
CITY-ST-ZIP TALLAHASSEE, FL 32308

TITLE DST
NAME GHAZVINI, MEHRDAD ☒ Delete
STREET ADDRESS 6000 BOYNTON HOMESTEAD
CITY-ST-ZIP TALLAHASSEE, FL 32312

TITLE D
NAME GHAZVINI, BEHZAD ☐ Delete
STREET ADDRESS 7516 PRESERVATION RD.
CITY-ST-ZIP TALLAHASSEE, FL 32312

TITLE D
NAME GHAZVINI, MEHRAN ☐ Delete
STREET ADDRESS 2910 ROYAL PALM WAY
CITY-ST-ZIP TALLAHASSEE, FL

TITLE D
NAME ASBURY, THOMAS BANKS ☐ Delete
STREET ADDRESS 3424 DORCHESTER CT.
CITY-ST-ZIP TALLAHASSEE, FL 32308

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Delete

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE
NAME ☐ Change ☐ Addition
STREET ADDRESS
CITY-ST-ZIP

TITLE
NAME ☐ Change ☐ Addition
STREET ADDRESS
CITY-ST-ZIP

TITLE President, Director ☒ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE
NAME ☐ Change ☐ Addition
STREET ADDRESS 100101258871
CITY-ST-ZIP 05/03/07--01005--026 **150.00

TITLE
NAME ☐ Change ☐ Addition
STREET ADDRESS
CITY-ST-ZIP

TITLE
NAME ☐ Change ☐ Addition
STREET ADDRESS
CITY-ST-ZIP

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 in Block 10 or Block 11 if changed, or on an attachment with an address with all other like empowered.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4/24/07

Date

574-1000

Daytime Phone #