## 2008 FOR PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# P01000116529

Entity Name: MOHAMED ALLY, INC.

OCALA, FL 34474

City-St-Zip:

FILED Sep 03, 2008 Secretary of State

**Current Principal Place of Business: New Principal Place of Business:** 6013 SW 115TH ST RD OCALA, FL 34476 **Current Mailing Address: New Mailing Address:** 6013 SW 115TH ST RD OCALA, FL 34476 FEI Number: 80-0024875 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( ) Name and Address of Current Registered Agent: Name and Address of New Registered Agent: ALLY, MOHAMED 6013 SW 115TH ST RD OCALA, FL 34476 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 In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice. Election Campaign Financing Trust Fund Contribution ( ). **OFFICERS AND DIRECTORS:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: Title: () Delete () Change () Addition ALLY, MOHAMED Name: Name: 6013 SW 115TH ST RD Address: Address: City-St-Zip: OCALA, FL 34476 US City-St-Zip: Title: **VPSD** Title: () Change () Addition ( ) Delete Name: ALLY, BIBI Name: 6013 SW 115 ST RD Address: 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: MOHAMED ALLY P 09/03/2008