

# 2004 FOR PROFIT CORPORATION ANNUAL REPORT

**FILED**  
**Feb 25, 2004 8:00 am**  
**Secretary of State**

02-05-2004 90015 004 \*\*\*150.00

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01212004 Chg-P CR2E034 (10/03)

<b>DOCUMENT # P01000117036</b>			
1. Entity Name <b>SHAHIR DAGHARA CORPORATION</b>			
Principal Place of Business 3637 MLK BLVD 101 FORT MYERS, FL 33916		Mailing Address 3637 MLK BLVD 101 FORT MYERS, FL 33916	
2. Principal Place of Business <b>3637 MLK BLVD</b> Suite, Apt. #, etc. <b>101</b>		3. Mailing Address <b>3637 M.L.K. BLVD</b> Suite, Apt. #, etc. <b>101</b>	
City & State <b>Fort Myer FL</b>		City & State <b>Fort Myer FL</b>	
Zip <b>33916</b>	Country <b>USA</b>	Zip <b>33916</b>	Country <b>USA</b>
4. FEI Number <b>04-3594192</b>		Applied For <input type="checkbox"/> Not Applicable	
5. Certificate of Status Desired <input type="checkbox"/>		\$8.75 Additional Fee Required	
6. Name and Address of Current Registered Agent <b>DAGHARA, SHAHIR</b> 3637 MLK BLVD 101 FORT MYERS, FL 33916		7. Name and Address of New Registered Agent Name: _____ Street Address (P.O. Box Number is Not Acceptable) _____ City: _____ FL Zip Code _____	
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: <u>Shahir Daghara</u> (NOTE: Registered Agent signature required when reinstating) DATE: _____			
<b>FILE NOW!!! FEE IS \$150.00</b> <b>After May 1, 2004 Fee will be \$550.00</b>		9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees	
10. OFFICERS AND DIRECTORS		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	P DAGHARA, SHANIR M 3637 MLK BLVD FORT MYERS, FL 33916 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>OW Per</b> <b>3260 PENZANCE</b> <b>Fort Myer FL - 33916</b> <input type="checkbox"/> Change <input type="checkbox"/> Addition
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12. I hereby certify that the information supplied with this filing does not qualify 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 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: <u>Shahir Daghara</u>		Date: _____ Daytime Phone: _____	