

2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P02000063756

FILED
Apr 30, 2006
Secretary of State

Entity Name: ZXY APPAREL BUYING SOLUTIONS, INC.

Current Principal Place of Business:

247 WEST MAIN STREET
APOPKA, FL 32703 US

New Principal Place of Business:

Current Mailing Address:

247 WEST MAIN STREET
APOPKA, FL 32703 US

New Mailing Address:

FEI Number: 04-3679815

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

MAYORGA, AUGUST C
200 NORTH DENNING DRIVE
SUITE 5
WINTER PARK, FL 32789 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: D () Delete
Name: HAIDER, SHARIFF M
Address: 1801 GRAND ISLE CIRCLE APT. 114-B
City-St-Zip: ORLANDO, FL 32810 US

Title: D () Delete
Name: JAMAL, ABDULSULTAN A
Address: MONKHURST HOUSE, SANDY CROSS LANE,
City-St-Zip: HEATHFIEKD, EAST SUSSEX, UK TN21 8QR UK

Title: D () Delete
Name: CHOUHAN, YOUSUF M
Address: 2632 PEMBROOK DRIVE
City-St-Zip: ORLANDO, FL 32810 US

Title: T () Delete
Name: WARES, MIA
Address: 11341 ASTON HALL DRIVE
City-St-Zip: JACKSONVILLE, FL 32246 US

Title: () Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

Title: D (X) Change () Addition
Name: CHOUHAN, YOUSUF M
Address: ORTAVAGEN 111
City-St-Zip: JONKOPING, SE 55458 SE

Title: D (X) Change () Addition
Name: WARES, MIA
Address: 807 GULLBERRY LANE
City-St-Zip: ALTAMONTE SPRINGS, FL 32714 US

Title: D () Change (X) Addition
Name: HAIDER, SHAHLA S
Address: 1801 GRAND ISLE CIRCLE
City-St-Zip: ORLANDO, FL 32810 US

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: SHARIFF M HAIDER

D

04/30/2006

Electronic Signature of Signing Officer or Director

Date