2006 FOR PROFIT CORPORATION ANNUAL REPORT (AR)

Mar 15, 2006 8:00 am Secretary of State DOCUMENT # P02000070517 02-17-2006 90077 011 ***150.00 1. Entity Name N & A OF PINELLAS, INC. Principal Place of Business Mailing Address **0000000** 4153 GRANDCHAMP CIRCLE PALM HARBOR FL 34685 4153 GRANDCHAMP CIRCLE PALM HARBOR FL 34685 2. Principal Place of Busines 3. Mailing Address Same 4153 grand Suite, Apt. #, etc. Suite, Apt. #, etc. CR2E034 (10/05) 1st MOORE City & State City & State Applied For 4. FEI Number 04-3690892 Not Applicable Country Country \$8.75 Additional 5. Certificate of Status Desired: Pinellas Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent ALI, ALAA A Street Address (P.O. Box Number is Not Acceptable) 4153 GRANDCHAMP CIRCLE PALM HARBOR FL 34685 City 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 <u>Alac</u> FILE NOW!!! FEE IS:\$150.00 After May 1, 2006 Fee Will Be \$550.00 9. Election Campaign Financing \$5.00 May Be Trust Fund Contribution. Added to Fees Make Check Payable to Florida Department of State 10. OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 TITLE Delete TITLE NAME ALI, ALAA A NAME STREET ADDRESS 4153 GRANDCHAMP CIRCLE STREET ADDRESS CITY-ST-ZIP PALM HARBOR FL 34685 CITY-ST-ZIP TITLE Defeta ☐ Addition NAME NAME STREET ADORESS STREET ADDRESS CITY-ST-78P CITY - ST- 7IP HILE Defete TITLE ☐ Change ☐ Addition NAME TABLE STREET ADDRESS STREET ADDRESS CITY-ST-71P CITY-ST-7P TITLE Detete TITLE Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-51-7P CITY-ST-ZIP TITLE ☐ Delete TITLE Chance ☐ Addition NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE Delete TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP 12. Thereby certify that the information supplied with this filing does not qualify for the exemptions contained in Section 1.19, Florida Statutes. Liturther cortify that the information indicated on this report or supplemental report is true and occurate 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. an address, with all other like empowered.



FLORIDA DEPARTMENT OF STATE Division of Corporations

February 21, 2006

N & A OF PINELLAS, INC. 4153 GRANDCHAMP CIRCLE PALM HARBOR, FL 34685

Subject: N & A OF PINELLAS, INC.

Reference Number:

P02000070517

Please be advised, we have received your annual report/uniform business report and your check(s) totaling \$150.00; however, the report <u>has not been filed</u> and a copy is being returned for the following correction(s):

The annual report/uniform business report must be signed by an officer or director of the corporation.

After the corrections have been made, please return the report to: Division of Corporations, P.O. Box 1500, Tallahassee, Florida 32302-1500 within 30 days from the date of this letter.

If you have additional questions or need further assistance, please call the Division of Corporations at 850-245-6056 and press 4. Your call will be answered in the order it is received.

/MH ANNUAL REPORTS SECTION