

2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P02000114797

FILED
Apr 30, 2004
Secretary of State

Entity Name: SHAMOON DEVELOPMENT INC.

Current Principal Place of Business:

6613 MISSION DR, APT #106
ORLANDO, FL 33821

New Principal Place of Business:

Current Mailing Address:

6613 MISSION DR, APT #106
ORLANDO, FL 33821

New Mailing Address:

FEI Number: 02-0652092

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

AHMAD, SHAHID
6613 MISSION DR, APT #106
ORLANDO, FL 33821 US

Name and Address of New Registered Agent:

AHMAD, SHAHID
6613 MISSION DR,
SUITE # 106
ORLANDO, FL 33821 US

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: SHAHID AHMAD

04/30/2004

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: PD () Delete
Name: AHMAD, SHAHID
Address: 6613 MISSION DR, APT #106
City-St-Zip: ORLANDO, FL 33821

Title: VP () Delete
Name: THOMPSON, MICHAEL
Address: 13161 LAKE BUTLER BLVD
City-St-Zip: WINDERMERE, FL 34786

Title: D (X) Delete
Name: KHAN, ABID
Address: 6613 MISSION DRIVE, SUITE 106
City-St-Zip: ORLANDO, FL 33821

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change () Addition
Name: AHMAD, SHAHID
Address: 6613 MISSION DR, SUITE# 106
City-St-Zip: ORLANDO, FL 33821

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

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

I hereby certify that the information supplied with this filing does not qualify for the 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 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: SHAHID AHMAD

PD

04/30/2004

Electronic Signature of Signing Officer or Director

Date