

# 2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P02000117744

Entity Name: 39TH AVE. IMPORTS, INC.

FILED  
Apr 12, 2004  
Secretary of State

## Current Principal Place of Business:

241 NE 39TH AVE  
GAINESVILLE, FL 32609

## New Principal Place of Business:

## Current Mailing Address:

241 NE 39TH AVE  
GAINESVILLE, FL 32609

## New Mailing Address:

FEI Number: 81-0577848

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

DANIEL, THOMAS A  
623 N MAIN ST  
GAINESVILLE, FL 33601

## 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: NOEPARVAR, SHAHRIYAR S  
Address: 4830 NW 43RD ST R 286  
City-St-Zip: GAINESVILLE, FL 32606

Title: D ( ) Delete  
Name: TAYALLI, HAMID  
Address: 6914 NW 59TH ST  
City-St-Zip: GAINESVILLE, FL 32653

Title: D ( ) Delete  
Name: TAJALLI, HOMAYOUN  
Address: 4315 NW 55TH WAY  
City-St-Zip: GAINESVILLE, FL 32606

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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: SHAHRIYAR S. NOEPARVAR

PRES

04/12/2004

Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date