

2004 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Jan 27, 2004 8:00 am
Secretary of State

01-27-2004 90006 015 ***150.00

DOCUMENT # P03000011381

1. Entity Name
 NORTH FLORIDA GROVE, INC.



Principal Place of Business
 2811 E INDUSTRIAL PLAZA
 TALLAHASSEE, FL 32301

Mailing Address
 2811 E INDUSTRIAL PLAZA
 TALLAHASSEE, FL 32301

2. Principal Place of Business
 Suite, Apt. #, etc.
 City & State
 Zip, Country

3. Mailing Address
 Suite, Apt. #, etc.
 City & State
 Zip, Country

11003001



01052004 Chg-P CR2E034 (10/03)

4. FEI Number
 43-2001531

Applied For
 Not Applicable

5. Certificate of Status Desired \$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

MANAUSA, DANIEL E
 3520 THOMASVILLE RD 4TH FL
 TALLAHASSEE, FL 32309

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 _____ DATE _____
Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating)

FILE NOW!!! FEE IS \$150.00
After May 1, 2004 Fee will be \$550.00

9. Election Campaign Financing Trust Fund Contribution. \$5.00 May Be Added to Fees

10. OFFICERS AND DIRECTORS

TITLE	D	<input type="checkbox"/> Delete
NAME	GHAVINI, HOSSEIN	
STREET ADDRESS	2811 E INDUSTRIAL PLAZA DR	
CITY-ST-ZIP	TALLAHASSEE, FL 32301	
TITLE	D	<input type="checkbox"/> Delete
NAME	GHAVINI, BEHZAD	
STREET ADDRESS	2811 E INDUSTRIAL PLAZA DR	
CITY-ST-ZIP	TALLAHASSEE, FL 32301	
TITLE	D	<input type="checkbox"/> Delete
NAME	GHAVINI, MEHRAN	
STREET ADDRESS	2811 E INDUSTRIAL PLAZA DR	
CITY-ST-ZIP	TALLAHASSEE, FL 32301	
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE		<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	Ghazvini, Hossein	
STREET ADDRESS	2811 E Industrial Plaza Dr	
CITY-ST-ZIP	Tallahassee, FL 32301	
TITLE		<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	Ghazvini, Behzad	
STREET ADDRESS	2811 E Industrial Plaza Dr	
CITY-ST-ZIP	Tallahassee FL 32301	
TITLE		<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	Ghazvini, Mehran	
STREET ADDRESS	2811 E Industrial Plaza Dr	
CITY-ST-ZIP	Tallahassee FL 32301	
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

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: Hossein Ghazvini 1/21/04 (850)402-1111

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #