

# 2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT # P03000023105

1. Entity Name  
THARPE STREET HOLDINGS, INC.



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

Mailing Address  
2811 E INDUSTRIAL PLAZA DR  
TALLAHASSEE, FL 32301 US

FILED  
08 APR -4 AM 11:01  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA



02082008 No Chg-P CR2E034 (11/05)

**DO NOT WRITE IN THIS SPACE**

4. FEI Number  
43-2001547

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  
2811 E INDUSTRIAL PLAZA DR  
TALLAHASSEE, FL 32301

**DO NOT WRITE  
IN THIS SPACE**

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

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

**FILE NOW!!! FEE IS \$150.00  
After May 1, 2008 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
NAME	GHAZVINI, HOSSEIN
STREET ADDRESS	2811 E INDUSTRIAL PLAZA DR
CITY-ST-ZIP	TALLAHASSEE, FL 32301
TITLE	PD
NAME	GHAZVINI, BEHZAD
STREET ADDRESS	2811 E INDUSTRIAL PLAZA DR
CITY-ST-ZIP	TALLAHASSEE, FL 32301
TITLE	D
NAME	GHAZVINI, MEHRAN
STREET ADDRESS	2811 E INDUSTRIAL PLAZA DR
CITY-ST-ZIP	TALLAHASSEE, FL 32301
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

100122275741  
04/04/08--01034--013 \*\*150.00

**DO NOT WRITE  
IN THIS SPACE**

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

4/2/08 850-205-5231