

2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P03000024004

Entity Name: FIESTA EXPO, INC.

FILED
Apr 30, 2008
Secretary of State

Current Principal Place of Business:

1250 HWY 29 SOUTH
LABELLE, FL 33935

New Principal Place of Business:

Current Mailing Address:

1250 HWY 29 SOUTH
LABELLE, FL 33935

New Mailing Address:

FEI Number: 84-1617913

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

ABUOQAB, OQAB
1250 HWY 29 SOUTH
LABELLE, FL 33935 US

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: P () Delete
Name: ABUOQAB, OQAB
Address: 12841 OAK POINT CIRCLE
City-St-Zip: FT MYERS, FL 33912 US

Title: V (X) Delete
Name: OKAB, NAWAL
Address: 5001 S.W. 20TH STREET
City-St-Zip: OCALA, FL 34474

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: ABUOQAB, OQAB
Address: 6821 LAKE DEVONWOOD DR
City-St-Zip: FT MYERS, FL 33908 US

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

I hereby certify that the information supplied with this filing does not qualify for the exemption stated 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 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: OQAB ABUOQAB

PRES

04/30/2008

Electronic Signature of Signing Officer or Director

Date