2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P03000065186

SIDDIQUI, SHAHZAD A

ORLANDO, FL 32836

10057 HONEY TREE COURT

Name: Address:

City-St-Zip:

FILED Apr 11, 2008 Secretary of State

Entity Name: TOURIST STREET, INC. **Current Principal Place of Business: New Principal Place of Business:** 7345 WEST SANDLAKE RD **SUITE #224** ORLANDO, FL 32819 **Current Mailing Address: New Mailing Address:** 10057 HONEY TREE COURT ORLANDO, FL 32836 FEI Number: 20-0043980 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired () Name and Address of Current Registered Agent: Name and Address of New Registered Agent: SIDDIQUI, SHAHZAD A 10057 HONEY TREE COURT ORLANDO, FL 32836 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:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: Title: () Delete Title: (X) Change () Addition SIDDIQUI, SHOAIB A Name: Name: SIDDIQUI, ASHHAD S 10407 EMERALD WOODS AVENUE 10407 EMERALD WOODS AVENUE Address: Address: City-St-Zip: ORLANDO, FL 32836 City-St-Zip: ORLANDO, FL 32836 Title: Title: () Delete (X) Change () Addition SIDDIQUI, SHAHZAD A Name: Name: SIDDIQUI, SHAHZAD A 10057 HONEY TREE COURT 10057 HONEY TREE COURT Address: Address: ORLANDO, FL 32836 ORLANDO, FL 32836 City-St-Zip: City-St-Zip: () Delete Title: (X) Change () Addition Title: SIDDIQUI, SHOAIB A SIDDIQUI, ASHHAD A Name: Name: 10407 EMERALD WOODS AVENUE 10407 EMERALD WOODS AVENUE Address: Address: City-St-Zip: ORLANDO, FL 32836 City-St-Zip: ORLANDO, FL 32836 Title: () Delete Title: () Change () Addition

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.

Name:

Address:

City-St-Zip:

Ρ SIGNATURE: SHAHZAD SIDDIQUI 04/11/2008