

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P03000065186

Entity Name: TOURIST STREET, INC.

FILED
Apr 12, 2009
Secretary of State

Current Principal Place of Business:

7345 WEST SANDLAKE RD
SUITE # 224
ORLANDO, FL 32819

New Principal Place of Business:

10057 HONEY TREE COURT
ORLANDO, FL 32836

Current Mailing Address:

10057 HONEY TREE COURT
ORLANDO, FL 32836

New Mailing Address:

FEI Number: 20-0043980

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

SIDDIQUI, SHAHZAD A
10057 HONEY TREE COURT
ORLANDO, FL 32836 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: V () Delete
Name: SIDDIQUI, ASHHAD S
Address: 10407 EMERALD WOODS AVENUE
City-St-Zip: ORLANDO, FL 32836

Title: P () Delete
Name: SIDDIQUI, SHAHZAD A
Address: 10057 HONEY TREE COURT
City-St-Zip: ORLANDO, FL 32836

Title: D () Delete
Name: SIDDIQUI, ASHHAD A
Address: 10407 EMERALD WOODS AVENUE
City-St-Zip: ORLANDO, FL 32836

Title: D () Delete
Name: SIDDIQUI, SHAHZAD A
Address: 10057 HONEY TREE COURT
City-St-Zip: ORLANDO, FL 32836

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:

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: SHAHZAD SIDDIQUI

P

04/12/2009

Electronic Signature of Signing Officer or Director

_____ Date