2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P04000003070

FILED Jan 16, 2009 Secretary of State

| Entity Name: ZEEBA, I | NC. | | | |
|--|----------------------------------|-----------------------------------|--|--|
| Current Principal Place of Business: | | New Principal Place | New Principal Place of Business: | |
| 2025 N.W 18 AVENUE MIAMI, FL 331427423 | | | | |
| Current Mailing Address: | | New Mailing Address | New Mailing Address: | |
| 2025 N.W 18 AVENUE MIAMI, FL 331427423 | | | | |
| FEI Number: 20-0570876 | FEI Number Applied For() | FEI Number Not Applicable () | Certificate of Status Desired () | |
| Name and Address of Current Registered Agent: | | Name and Address of | Name and Address of New Registered Agent: | |
| ROUHANI, MOHAMMAE 2025 N.W 18 AVENUE MIAMI, FL 331427423 L | | | | |
| The above named entity in the State of Florida. | submits this statement for the լ | ourpose of changing its registere | d office or registered agent, or both, | |
| SIGNATURE: | | | | |
| Electronic Signature of Registered Agent | | ent | Date | |
| Election Campaign Financin | g Trust Fund Contribution (). | | | |
| OFFICERS AND DIRECTORS: | | ADDITIONS/CHANG | ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: | |
| Title· PD (|) Delete | Title: PD | (X) Change () Addition | |

ROUHANI, KAYNANA B ROUHANI, KAYHAN B Name: Name: 2025 N.W. 18 AVE. 2025 N.W. 18 AVE. Address: Address: City-St-Zip: MIAMI, FL 33142 City-St-Zip: MIAMI, FL 33142 Title: STD () Delete Title: STD (X) Change () Addition KAMYAR, ROUHANI ROUHANI, KAMYAR Name: Name: Address: 2025 NW 18 AVE Address: 2025 NW 18 AVE

PEMBROKE PINES, FL 33028 PEMBROKE PINES, FL 33028 City-St-Zip: City-St-Zip: Title: SDT () Change () Addition

Title: () Delete Name: ROUHANI, MOHAMMAD Name: Address: 2025 N.W. 18 AVE Address: City-St-Zip: MIAMI, FL 33142 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: MOHAMMAD ROUHANI SDT 01/16/2009