2007 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Jan 05, 2007
Secretary of State

DOCUMENT# P04000041106

Entity Name: FLORIDA STURGEON ENGINEERING, INC.

Current Principal Place of Business:

5709 SW 18TH STREET
GAINESVILLE, FL 32608

New Principal Place of Business:

Current Mailing Address:

5709 SW 18TH ST
GAINESVILLE, FL 32608

New Mailing Address:

FEI Number: 20-0832314 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired (X)**

Name and Address of Current Registered Agent:

SHIRAZIAN, EAMAN
5709 SW 18TH STREET
GAINESVILLE, FL 32608 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: CEO ( ) Delete
Name: RAMAZANI, AHAMAD
Address: 5709 SW 18TH ST
City-St-Zip: GAINESVILLE, FL 32608

Title: D ( ) Delete
Name: SADIGHI, MARZIEH
Address: 5709 SW 18TH ST
City-St-Zip: GAINESVILLE, FL 32608

Title: D ( ) Delete
Name: SHIRAZIAN, EAMAN
Address: 5709 SW 18TH ST
City-St-Zip: GAINESVILLE, FL 32608

Title: D ( ) Delete
Name: SERFLING, STEVEN A
Address: 7350 SO. TAMIAMI TRAIL
City-St-Zip: SARASOTA, FL 34231

Title: D ( ) Delete
Name: RADTKE, RALPH
Address: 7350 SO. TAMIAMI TRAIL
City-St-Zip: SARASOTA, FL 34231

Title: D ( ) Delete
Name: SHIRAZIAN, SEYED G
Address: 5709 SW 18TH STREET
City-St-Zip: GAINESVILLE, FL 32608 US

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:

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 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: SEYED SHIRAZIAN D 01/05/2007

Electronic Signature of Signing Officer or Director — Date