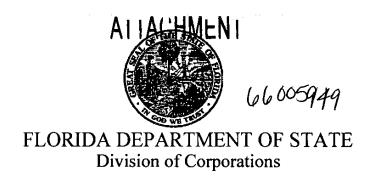
2006 FOR PROFIT CORPORATION ANNUAL REPORT (AR)

## Mar 20, 2006 8:00 am **Secretary of State DOCUMENT # P04000084948** 1. Entity Name 02-22-2006 90012 008 \*\*\*158.75 LUXOR TRANSPORTATION CORP. Principal Place of Business Mailing Address 8500 BELCHER ROAD UNIT 906 PINELLAS PARK FL 33781 8500 BELCHER ROAD UNIT 906 PINELLAS PARK FL 33781 2. Principal Place of Business 85°0 BELCHEL 3. Mailing Address Suite. Apt. 4, etc., Suite, Apt. #, etc. 1st MOORE CR2E034 (10/05) City & State Applied For 4. FEI Number PINPILOS PARK 56-2463388 Not Applicable Country Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent IBRAHIM, NIDAL Street Address (P.O. Box Number is Not Acceptable) 8500 BELCHER ROAD UNIT 906 PINELLAS PARK FL 33781 City Zip Code 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. I am familiar with, and accept SIGNATURE Signature, typed or protect name of registared agent and late if applicable (NOTE: Registered Agent signatum required when reinstating) FILE NOW III FEE IS \$150.00 After May 1, 2006 Fee Will Be \$550.00 9. Election Campaign Financing \$5.00 May Be Trust Fund Contribution. Added to Fees Make Check Payable to Florida Department of State ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 10. OFFICERS AND DIRECTORS 11. HILE ☐ Defete TITLE ☐ Change Addition IBRAHIM, NIDAL NAME STREET ADDRESS 8500 BELCHER ROAD UNIT 906 STREET ADDRESS CITY-ST-ZIP PINELLAS PARK FL 33781 CITY-ST-ZIP TITLE Defeie TITLE ☐ Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP mir \_-0±65 \_-TOLE Chance ContibbA [7] HAM HAME STREET ADDRESS STREET ADDRESS CITY-ST-71P CITY-SI-ZIP ☐ Delete TELE IME ☐ Change Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP Details TITLE ☐ Change ☐ Addition TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP Detete ISTLE THLE ☐ Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-SI-ZIP CITY-SI-7IP 12. Thereby certify that the infermation substied with this filing does not qualify for the exemptions contained in Section 119. Florida Statutes. I further certify that the information indicated on this report of supplemental sport is true and accurate and that my signature shall have the same legal effect as it made under oath; that I am an officer or director of the corporation or the receiver or true elempowered to execute this report as required by Chapter 607. Florida Statutes, and that my name appears in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like onlowings. SIGNATURE:

FILED



February 24, 2006

LUXOR TRANSPORTATION CORP. 8500 BELCHER ROAD UNIT 906 PINELLAS PARK, FL 33781

Subject: LUXOR TRANSPORTATION CORP.

Reference Number:

P04000084948

Please be advised, we have received your annual report/uniform business report and your check(s) totaling \$158.75; however, the report <u>has not been filed</u> and a copy is being returned for the following correction(s):

The annual report/uniform business report must be signed by an officer or director of the corporation.

After the corrections have been made, please return the report to: Division of Corporations, P.O. Box 1500, Tallahassee, Florida 32302-1500 within 30 days from the date of this letter.

If you have additional questions or need further assistance, please call the Division of Corporations at 850-245-6056 and press 4. Your call will be answered in the order it is received.

/CD ANNUAL REPORTS SECTION