2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P05000015707

Entity Name: TEES FOR ALL INC.

FILED Jan 26, 2006 Secretary of State

Current Principal Place of Business:			New Prin	New Principal Place of Business:		
1010 N HOAGLAND BLVD KISSIMMEE, FL 34741 US				1012 N HOAGLAND BLVD KISSIMMEE, FL 34741 US		
Current Mailing Address:			New Mai	New Mailing Address:		
1010 N HOAGLAND BLVD KISSIMMEE, FL 34741 US			1012 N HOAGLAND BLVD KISSIMMEE, FL 34741 US			
FEI Number:	20-2259935	FEI Number Applied For ()	FEI Number Not Ap	plicable ()	Certificate of Status Desired ()	
Name and	Address of Cu	rrent Registered Agent:	Name an	Name and Address of New Registered Agent:		
VICARUDDIN, KAZI 12477 SOUTH ORANGE BLOSSOM TRAIL ORLANDO, FL 32837 US						
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.						
SIGNATUR	!E:					
Electronic Signature of Registered Agent				Date		
Election Cam	paign Financing	Trust Fund Contribution ().				
OFFICERS AND DIRECTORS:			ADDITIO	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:		
Title: Name: Address: City-St-Zip:	PSTD () E AWAN, SAJID 4300 S RIO GRA ORALNDO, FL 3		Title: Name: Address: City-St-Zip:	AWAN, SAJID 4300 S RIO GI	C) Change () Addition RANDE AVENUE 32839	
Title: Name: Address: City-St-Zip:	D ()E BASIT, MOHAMM 4300 S RIO GRA ORLANDO, FL 3	NDE AVE	Title: Name: Address: City-St-Zip:	,) Change()Addition	
Title: Name: Address: City-St-Zip:	D () E ANWAR, MUHAM 4300 S RIO GRA ORLANDO, FL 3	NDE AVENUE	Title: Name: Address: City-St-Zip:	() Change ()Addition	

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: SAJID AWAN PSTD 01/26/2006