

# **2012 FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P05000104046

**Entity Name:** ORSHA ENTERPRISES, INC.

**FILED**  
**Apr 26, 2012**  
**Secretary of State**

**Current Principal Place of Business:**

5808 CORPORATE BLVD. SUITE B  
TAMPA, FL 336345167

**New Principal Place of Business:**

5910 N LINCOLN AVE  
TAMPA, FL 33614

**Current Mailing Address:**

P.O. BOX 152865  
TAMPA, FL 336842865

**New Mailing Address:**

**FEI Number:** 26-0418198

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

SHARPE, RANDALL T  
5808 CORPORATE BLVD. SUITE B  
TAMPA, FL 336345167 US

**Name and Address of New Registered Agent:**

SHARPE, RANDALL T  
5910 N LINCOLN AVE  
TAMPA, FL 33614 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.

SIGNATURE: \_\_\_\_\_

Electronic Signature of Registered Agent

04/26/2012

\_\_\_\_\_  
Date

**OFFICERS AND DIRECTORS:**

Title: DPS  
Name: SHARPE, RANDALL T  
Address: 5910 N LINCOLN AVE  
City-St-Zip: TAMPA, FL 33614

I hereby 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 all other like empowered.

SIGNATURE: RANDALL T. SHARPE

PRES

04/26/2012

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date