2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P06000144606

Entity Name: ON POINT FASHION INC

FILED Feb 16, 2007 Secretary of State

Current Principal Place of Business: New Principal Place of Business:

4309 US HIGHWAY 19

NEW PORT RICHEY, FL 34652

Current Mailing Address: New Mailing Address:

4309 US HIGHWAY 19 NEW PORT RICHEY, FL 34652

FEI Number: 20-5909777 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

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

ELKABANI, MOETASEM ELKABANY, MOETASEM 3034 SALISBURRY DR 3034 SALISBURY DR HOLIDAY, FL 34691 HOLIDAY, FL 34691 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: MOETASEM ELKABANY 02/16/2007

> Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

VΡ

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

VΡ

Title: () Delete Title: (X) Change () Addition ELKABANI, MOETASEM ELKABANY, MOETASEM Name: Name: 3034 SALISBURY DR 3034 SALISBURRY DR Address: Address: City-St-Zip:

HOLIDAY, FL 34691 City-St-Zip: HOLIDAY, FL 34691

Title: Title: (X) Change () Addition () Delete Name: ELKABANI, MOHAMMED Name: ALI, MOHAMED 3034 SALISBURRY DR 3034 SALISBURY DR Address: Address: HOLIDAY, FL 34691 HOLIDAY, FL 34691 City-St-Zip: City-St-Zip:

Title: (X) Change () Addition Title: S. T () Delete S, T

ABDELAZIZ, HALA Name: ABDELAZIZ, HALA Name: 3034 SALISBURRY DR 3034 SALISBURY DR Address: Address: City-St-Zip: HOLIDAY, FL 34691 City-St-Zip: HOLIDAY, FL 34691

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.

Ρ SIGNATURE: MOETASEM ELKABANY 02/16/2007