

# 2011 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P07000079823

**FILED**  
**Apr 05, 2011**  
**Secretary of State**

**Entity Name:** EXPRESS WHOLESALAS PLUS INC

**Current Principal Place of Business:**

11500 SUMMIT WEST BLVD  
# 42 D  
TAMPA, FL 33617 US

**New Principal Place of Business:**

11500 SUMMIT WEST BLVD.  
# 42D  
TAMPA, FL 33617 US

**Current Mailing Address:**

11500 SUMMIT WEST BLVD  
# 42 D  
TAMPA, FL 33617 US

**New Mailing Address:**

11500 SUMMIT WEST BLVD.  
# 42D  
TAMPA, FL 33617 US

**FEI Number:** 26-0522103

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

AHMAD, ZORBA  
11500 SUMMIT WEEST BLVD  
42 D  
TAMPA, FL 33617 US

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

AHMAD, ZORBA  
11500 SUMMIT WEST BLVD.  
#42D  
TAMPA, FL 33617 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: ZORBA AHMAD

04/05/2011

Electronic Signature of Registered Agent

Date

**OFFICERS AND DIRECTORS:**

Title: D  
Name: AHMAD, ZORBA  
Address: 11500 SUMMIT WEST BLVD., # 42D  
City-St-Zip: TAMPA, FL 33617 US

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: ZORBA AHMAD

D

04/05/2011

Electronic Signature of Signing Officer or Director

Date