

# 2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P07000135093

Entity Name: SG 50TH STREET INC

FILED  
Jun 12, 2009  
Secretary of State

## Current Principal Place of Business:

320 W FLETCHER AVENUE  
STE 101  
TAMPA, FL 33612

## New Principal Place of Business:

2015 N 50TH STREET  
TAMPA, FL 33619

## Current Mailing Address:

320 W FLETCHER AVENUE  
STE 101  
TAMPA, FL 33612

## New Mailing Address:

2015 N 50TH STREET  
TAMPA, FL 33619

FEI Number: 26-1635567

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

DRUDY, DENISE  
320 W FLETCHER AVENUE  
STE 101  
TAMPA, FL 33612 US

## Name and Address of New Registered Agent:

GHARSALLI, SALEM  
18430 KUKA LANE  
SPRING HILL, FL 34610 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: SALEM GHARSALLI

06/12/2009

Electronic Signature of Registered Agent

Date

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: P ( ) Delete  
Name: GHARSALLI, SALEM  
Address: 18430 KUKA LANE  
City-St-Zip: SPRINGHILL, FL 34610 US

Title: VP ( ) Delete  
Name: GHARSALLI, PAMELA  
Address: 18430 KUKA LANE  
City-St-Zip: SPRINGHILL, FL 34610 US

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify 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: OSAMA S KAYALI

CPA

06/12/2009

Electronic Signature of Signing Officer or Director

Date