

# 2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P94000016580

Entity Name: SARAH SALIM SORATHIA, INC.

FILED  
Jan 11, 2009  
Secretary of State

## Current Principal Place of Business:

1906 W. KENNEDY  
TAMPA, FL 33606

## New Principal Place of Business:

## Current Mailing Address:

1906 W. KENNEDY  
TAMPA, FL 33606

## New Mailing Address:

7617 TERRACE RIVER DR  
TAMPA, FL 33637 79

FEI Number: 59-3238866

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

SORATHIA, SALIM Y  
7617 TERRACE RIVER DR  
TAMPA, FL 336377920 US

## Name and Address of New Registered Agent:

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

Date

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: P ( ) Delete  
Name: SORATHIA, SALIM Y  
Address: 7617 TERRACE RIVER DR  
City-St-Zip: TEMPLE TERRACE, FL 336377920

Title: VP ( ) Delete  
Name: HNIN, KHIN M  
Address: 7617 TERRACE RIVER DR  
City-St-Zip: TEMPLE TERRACE, FL 336377920

Title: S ( ) Delete  
Name: HNIN, KATHYI  
Address: 7617 TERRACE RIVER DR  
City-St-Zip: TEMPLE TERRACE, FL 336377920

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change ( ) Addition  
Name: SORATHIA, SALIM Y  
Address: 7617 TERRACE RIVER DR  
City-St-Zip: TEMPLE TERRACE, FL 336377920

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: SALIMSORATHIA

P

01/11/2009

Electronic Signature of Signing Officer or Director

Date