

2008 FOR PROFIT CORPORATION ANNUAL REPORT

2/ **FILED**
Mar 10, 2008 8:00 am
Secretary of State

02-11-2008 90049 050 ***150.00

DOCUMENT # P95000034229 1. Entity Name WHOLESALE ORIENTAL RUGS, INC.					
Principal Place of Business 1444 BISCAYNE BLVD. SUITE 220 MIAMI, FL 33132			Mailing Address 1490 BISCAYNE BLVD MIAMI FL 33132		
2. Principal Place of Business - No P.O. Box Suite, Apt. #, etc. City & State Zip Country			3. Mailing Address Suite, Apt. #, etc. City & State Zip Country		
4. FEI Number 65-0577280			Applied For ☐ Not Applicable		
5. Certificate of Status Desired ☐			\$8.75 Additional Fee Required		
6. Name and Address of Current Registered Agent SIAMAC, SEDIGHIM 1490 BISCAYNE BLVD MIAMI FL 33132			7. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) City FL Zip Code		
8. 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. I am familiar with, and accept the obligations of registered agent. SIGNATURE: <u>SIAMAC SEDIGHIM</u> (NOTE: Registered Agent signature required when amending) DATE:					
FILE NOW!!! FEE IS \$150.00 After May 1, 2008 Fee will be \$550.00		9. Election Campaign Financing ☐ Trust Fund Contribution ☐ \$5.00 May Be Added to Fees			
10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D SHAKIB-PANAH, JACOB 1444 BISCAYNE BLVD., SUITE 220 MIAMI, FL 33132		☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D SEDIGHIM, SIAMAC 1444 BISCAYNE BLVD., SUITE 220 MIAMI, FL 33132		☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition
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12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.					
SIGNATURE: <u>SIAMAC SEDIGHIM</u>			3-6-08 305-374-3976		