## 2004 FOR PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# P95000057713

Entity Name: SITAARA ENTERPRISES, INC.

516 LAKE BRIDGE LANE #113

APOPKA, FL 32703

Address:

City-St-Zip:

FILED Apr 08, 2004 Secretary of State

**Current Principal Place of Business: New Principal Place of Business:** 2012 S. ORANGE BLOSSOM TRAIL 2075 AMERICANA BLVD ORLANDO, FL 32805 ORLANDO, FL 32839 **Current Mailing Address: New Mailing Address:** 9030 SHAWN PARK PL. ORLANDO, FL 32819 FEI Number: 59-3324160 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: ALI, NIZAR 2012 S OBT ORLANDO, FL 32805 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: Electronic Signature of Registered Agent Date Election Campaign Financing Trust Fund Contribution ( ). **OFFICERS AND DIRECTORS:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: Title: ( ) Delete Title: () Change () Addition ALI, NIZAR Name: Name: 2251 EAST SEMORAN BOULEVARD Address: Address: City-St-Zip: APOPKA, FL 32703 City-St-Zip: Title: () Delete Title: () Change () Addition Name: MOMIN, NIZAR A Name:

Address:

City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), 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: NIZAR ALI P 04/08/2004