2006 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 27, 2006
Secretary of State

DOCUMENT# P95000091094

Entity Name: ZUREIQ HOUSING CO.

Current Principal Place of Business:

4669 CHEYENNE POINT TRAIL
KISSIMMEE, FL 34746 US

New Principal Place of Business:

Current Mailing Address:

4669 CHEYENNE POINT TRAIL
KISSIMMEE, FL 34746 US

New Mailing Address:

FEI Number: 59-3356306 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

PORTLOCK, DAVID
7345 SANDLAKE ROAD #412
ORLANDO, FL 32819 US

Name and Address of New Registered Agent:

ZUREIQ, MIKE
4669 CHEYENNE POINT TRAIL
KISSIMMEE, FL 34746 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: MIKE ZUREIQ 04/27/2006
Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ( ).

OFFICERS AND DIRECTORS:

Title: DP ( ) Delete
Name: ZUREIQ, MIKE
Address: 4669 CHEYENNE POINT RAIL
City-St-Zip: KISSIMMEE, FL 34746

Title: D ( ) Delete
Name: ZUREIQ, RAED
Address: P.O. BOX 420907
City-St-Zip: KISSIMMEE, FL 34742

Title: PD ( ) Delete
Name: ZUREIQ, SAILM
Address: 4669 CHEYENNE POINT TRAIL
City-St-Zip: KISSIMMEE, FL 34746

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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 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: MIKE ZUREIQ DP 04/27/2006
Electronic Signature of Signing Officer or Director Date