

2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P96000069678

FILED
Apr 14, 2004
Secretary of State

Entity Name: LIBERTY INC OF TAMPA

Current Principal Place of Business:

D/B/A NEW YORK GOLD
2234 UNIVERSITY MALL E FOWLER AVE
TAMPA, FL 33612 US

New Principal Place of Business:

Current Mailing Address:

D/B/A NEW YORK GOLD
2234 UNIVERSITY MALL
TAMPA, FL 33612 US

New Mailing Address:

FEI Number: 59-3395391

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

ALI, AZIZA S
2234 UNIVERSITY MALL
E. FOWLER AVE
TAMPA, FL 33612 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: PS () Delete
Name: ALI, AZIZA S
Address: 2234 UNIVERSITY MALL E FOWLER AVE
City-St-Zip: TAMPA, FL 33612

Title: SD () Delete
Name: ALI, SALEEM AKHTAR
Address: 2234 UNIVERSITY MALL, E. FOWLER AVE
City-St-Zip: TAMPA, FL 33612

Title: VP (X) Delete
Name: SALEHANI, GULHUSSAIN
Address: 5006 BROMPTON DR, APT #B
City-St-Zip: GREENSBORO, NC 27407

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 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: AZIZA ALI

PD

04/14/2004

Electronic Signature of Signing Officer or Director

Date