2008 FOR PROFIT CORPORATION

ANNUAL REPORT

DOCUMENT # P97000004411

1. Entity Name

EL AMIR OF TAMPA COMPANY

T.



Principal Place of Business

2099 HIGHLAND AVENUE CLEARWATER, FL 33755 Mailing Address

2099 HIGHLAND AVENUE CLEARWATER, FL 33755

FILED Apr 28, 2008 08:00 AN Secretary of State



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DO NOT WRITE IN THIS SPACE

CR2E034 (11/05) 01152008 No Chg-P

4. FEI Number 59-3424453

Applied For Not Applicable

5. Certificate of Status Desired

\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

ZEIN-E-DING, TAREK 2099 HIGHLAND AVENUE CLEARWATER, FL 33755

SIGNATURE:

DO NOT WRITE IN THIS SPACE

4-21-08

Daytime Phone #

| 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. | | | | | |
|--|--|--|--|--------------------------------|---|
| SIGNATURESignature, typed or printed name of registered agent and latte if applicable. (NOTE Registered Agent signature required when reinstating) 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 | | \$5.00 May Be Added to Fees | |
| 10. OFFICERS AND DIRECTORS | | | | | |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | PT ZEIN-E-DING, TAREK 2099 HIGHLAND AVENUE CLEARWATER, FL 33755 | | | | |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | | | | | U00000924282 05/16/08-80087-007 150.00 |
| TITLE NAME STREET ADDRESS CITY-ST-2IP | | | | DO | NOT WRITE |
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| TITLE NAME STREET ADDRESS CITY-ST-ZIP | | | | | , |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | | | | , | |
| 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 reports 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 impowered 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. | | | | | |

TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR