

2006 FOR PROFIT CORPORATION ANNUAL REPORT (AR)

FILED
Mar 27, 2006 8:00 am
Secretary of State

03-27-2006 90273 040 ***150.00

DOCUMENT # P98000051363

1. Entity Name

QATAR AMERICAN HOLDINGS CORP.



Principal Place of Business

**102411 OVERSEAS HIGHWAY
KEY LARGO FL 33037**

Mailing Address

**102411 OVERSEAS HIGHWAY
KEY LARGO FL 33037**



2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

4. FEI Number

65-0847368

Applied For

Not Applicable

Zip

Country

Zip

Country

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

**KURFIST-CIOFFI, WENDY
102411 OVERSEAS HWY
KEY LARGO FL 33037**

Name

Wendy Kurfist

Street Address (P.O. Box Number is Not Acceptable)

102411 Overseas Highway

City

Key Largo

FL

Zip Code

33035

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

Signature, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

FILE NOW!!! FEE IS \$150.00

After May 1, 2006 Fee Will Be \$550.00

Make Check Payable to Florida Department of State

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
D KURFIST-CIOFFI, WENDY ☐ Delete
STREET ADDRESS
CITY-ST-ZIP
102411 OVERSEAS HIGHWAY
KEY LARGO FL 33037

TITLE
NAME
D Wendy Kurfist ☒ Change ☐ Addition
STREET ADDRESS
CITY-ST-ZIP
102411 Overseas Highway
Key Largo, FL 33037

TITLE
NAME
☐ Delete
STREET ADDRESS
CITY-ST-ZIP

TITLE
NAME
D Cioffi, John ☐ Change ☒ Addition
STREET ADDRESS
CITY-ST-ZIP
102411 Overseas Highway
Key Largo, FL 33037

TITLE
NAME
☐ Delete
STREET ADDRESS
CITY-ST-ZIP

TITLE
NAME
☐ Change ☐ Addition
STREET ADDRESS
CITY-ST-ZIP

TITLE
NAME
☐ Delete
STREET ADDRESS
CITY-ST-ZIP

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TITLE
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☐ Delete
STREET ADDRESS
CITY-ST-ZIP

TITLE
NAME
☐ Change ☐ Addition
STREET ADDRESS
CITY-ST-ZIP

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Section 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:

Wendy Kurfist Wendy Kurfist

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

3/17/06

Date

Daytime Phone #