2009 FOR PROFIT CORPORATION AMENDED ANNUAL REPORT

DOCUMENT# P99000077134

FILED Dec 18, 2009 Secretary of State

Entity Name: F&T OF BELLE GLADE, INC. **Current Principal Place of Business: New Principal Place of Business:** 225 SW 1ST ST. BELLE GLADE, FL 33430 **Current Mailing Address: New Mailing Address:** 225 SW 1ST ST. BELLE GLADE, FL 33430 FEI Number: 65-1050630 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired (X) Name and Address of Current Registered Agent: Name and Address of New Registered Agent: BARHOUSH, SAMAR 225 S.W. 1T STREET BELLE GLADE, FL 33430 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 **OFFICERS AND DIRECTORS:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: Title: () Delete Title: (X) Change () Addition

BARHOUSH, SAMAR BARHOUSH, SAMAR Name: Name: 225 SW 1ST ST. 225 SW 1ST ST. Address: Address: City-St-Zip: BELLE GLADE, FL 33430 City-St-Zip: BELLE GLADE, FL 33430

Title: DV Title: VD () Delete (X) Change () Addition Name: BARHOUSH, TAMAN Name: BARHOUSH, HANI

225 SW 1ST ST. 225 SW 1ST ST. Address: Address:

BELLE GLADE, FL 33430 BELLE GLADE, FL 33430 City-St-Zip: City-St-Zip:

Title: (X) Change () Addition Title: PD () Delete SD BARHOUSH, MIRIAM BARHOUSH, MOHAMMAD Name: Name: 225 SW 1ST ST 225 SW 1ST ST Address: Address:

City-St-Zip: BELLE GLADE, FL 33430 City-St-Zip: BELLE GLADE, FL 33430

Title: () Delete Title: () Change (X) Addition

BARHOUSH, SAEED Name: Name: Address: Address: 225 SW 1ST STREET City-St-Zip: City-St-Zip: BELLE GLADE, FL 33430

I hereby certify that the information supplied with this filing does not qualify 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: SAMAR BARHOUSH PD 12/18/2009