



**2007 FOR PROFIT CORPORATION  
ANNUAL REPORT**

**FILED**  
**Mar 09, 2007 08:00 AM**  
**Secretary of State**

<b>DOCUMENT # J66078</b> 1. Entity Name ANJEL CORPORATION	
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Principal Place of Business 220 S COLLIER BLVD 701 MARCO ISLAND, FL 34145 US	Mailing Address 220 S COLLIER BLVD 701 MARCO ISLAND, FL 34145 US
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**DO NOT WRITE IN THIS SPACE**



01052007 No Chg-P CR2E034 (11/05)

4. FEI Number 59-2786457	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	<b>\$8.75</b> Additional Fee Required

6. Name and Address of Current Registered Agent

LIMA, JOSE E  
220 S COLLIER BLVD.  
UNIT #701  
MARCO ISLAND, FL 34145

**DO NOT WRITE  
IN THIS SPACE**

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 \_\_\_\_\_ DATE \_\_\_\_\_  
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

**FILE NOW!!! FEE IS \$150.00**  
**After May 1, 2007 Fee will be \$550.00**

9. Election Campaign Financing  
Trust Fund Contribution.  **\$5.00** May Be  
Added to Fees

U000000661372  
03/20/07-80038-015 150.00

10. OFFICERS AND DIRECTORS

TITLE NAME STREET ADDRESS CITY - ST - ZIP	PTD LIMA, JOSE E. 220 S COLLIER BLVD #701 MARCO ISLAND, FL
TITLE NAME STREET ADDRESS CITY - ST - ZIP	DS LIMA, ANDREA K. 220 S. COLLIER BLVD #701 MARCO ISLAND, FL
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**DO NOT WRITE  
IN THIS SPACE**

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 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: Jose E. Lima 3/09/07 239 789-2266  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #