


2006 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
May 01, 2006 08:00 AM
Secretary of State

DOCUMENT # P01000045921

1. Entity Name
SHANTOJA, INC.



Principal Place of Business
1225 S PATRICK DRIVE
SATELLITE BEACH, FL 32937

Mailing Address
1225 S PATRICK DRIVE
SATELLITE BEACH, FL 32937

DO NOT WRITE IN THIS SPACE



04172006 No Chg- CR2E034 (11/05)

4. FEI Number
59-3712761

Applied For
 Not Applicable

5. Certificate of Status Desired **\$8.75** Additional Fee Required

6. Name and Address of Current Registered Agent

CHOWDHURY, MOBASHER B
1225 S PATRICK DRIVE
SATELLITE BEACH, FL 32937

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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, 2006 Fee will be \$550.00

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

10. OFFICERS AND DIRECTORS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD CHOWDHURY, MOBASHER H 2800 N WICKHAM RD., #1410 MELBOURNE, FL 32935
TITLE NAME STREET ADDRESS CITY-ST-ZIP	STD ISLAM, ANNA 1361 ANDES DR. WINTER SPRINGS, FL 32708
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VPD BHUIYAN, SHABNAM I 127 WOODLEAF DR. WINTER SPRINGS, FL 32708
TITLE NAME STREET ADDRESS CITY-ST-ZIP	
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TITLE NAME STREET ADDRESS CITY-ST-ZIP	

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 05/13/06-80089-022 150.00

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: Mobasher H. Chowdhury MOBASHER H. CHOWDHURY 04-27-06, 321-773-1833

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #