2007 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Mar 16, 2007 08:00 AM
Secretary of State

DOCUMENT # 416232

1. Entity Name
CENTRAL FLORIDA ACTION INC

Principal Place of Business	Mailing Address
350 LINCOLN RD, STE 315 MIAMI BCH, FL 33139	350 LINCOLN RD, STE 315 MIAMI BCH, FL 33139

DO NOT WRITE IN THIS SPACE

02082007 No Chg-P CR2E034 (11/05)

4. FEI Number
59-1440068
☐ Applied For
☐ Not Applicable

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

6. Name and Address of Current Registered Agent

CHATANI, SHEVAK
350 LINCOLN RD., #315
MIAMI BEACH, FL 33139

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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, 2007 Fee will be $550.00

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

UD00000668469
03/27/07-80031-019 150.00

10. OFFICERS AND DIRECTORS

TITLE	D
NAME	VASANDANI, BHAGWAN N.
STREET ADDRESS	350 LINCOLN RD, STE315
CITY-ST-ZIP	MIAMI BEACH, FL
TITLE	T
NAME	CHATANE, HARESH C
STREET ADDRESS	350 LINCOLN RD, STE 315
CITY-ST-ZIP	MIAMI BEACH, FL
TITLE	D
NAME	CHATANI, KISHU C
STREET ADDRESS	350 LINCOLN RD. STE. 315
CITY-ST-ZIP	MIAMI BEACH, FL 33139
TITLE	D
NAME	CHATANI, PARAKASH C
STREET ADDRESS	350 LINCOLN RD. STE. 315
CITY-ST-ZIP	MIAMI BEACH, FL 33139
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

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: Haresh C Chatane T. 3-13-07
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #