

2006 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Jan 30, 2006 8:00 am
Secretary of State

01-30-2006 90064 023 ***150.00

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01252006 Chg-P CR2E034 (11/05)

DOCUMENT # 588977 1. Entity Name RAJA HOLDINGS, INC.					
Principal Place of Business 5204 PARISIENNE PLACE SARASOTA, FL 34238 US			Mailing Address PO BOX 19379 SARASOTA, FL 34276 US		
2. Principal Place of Business		3. Mailing Address			
Suite, Apt. #, etc.		Suite, Apt. #, etc.			
City & State		City & State			
Zip	Country	Zip	Country		
4. FEI Number 59-1967957			Applied For <input type="checkbox"/> Not Applicable		
5. Certificate of Status Desired <input type="checkbox"/>			\$8.75 Additional Fee Required		
6. Name and Address of Current Registered Agent			7. Name and Address of New Registered Agent		
BRAAM, JOHN 7539 BOTANICA PARKWAY SARASOTA, FL 34238			Name HOWES, EVE L. Street Address (P.O. Box Number is Not Acceptable) 7537 BOTANICA PARKWAY City SARASOTA FL Zip Code 34238		
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 1/24/06		
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. <input type="checkbox"/>		\$5.00 May Be Added to Fees	
10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11		
TITLE	P <input type="checkbox"/> Delete	<input type="checkbox"/> Change <input type="checkbox"/> Addition			
NAME	DENNIS, JAMES L				
STREET ADDRESS	7071 BAYVIEW AVE., SUITE 512				
CITY-ST-ZIP	THORNHILL, ON L3T7Y8				
TITLE	ST <input type="checkbox"/> Delete	<input type="checkbox"/> Change <input type="checkbox"/> Addition			
NAME	DENNIS, ALICIA R				
STREET ADDRESS	7071 BAYVIEW AVE., SUITE 512				
CITY-ST-ZIP	THORNHILL, ON L3T7Y8				
TITLE	V <input type="checkbox"/> Delete	<input type="checkbox"/> Change <input type="checkbox"/> Addition			
NAME	DENNIS, CAROLYN S				
STREET ADDRESS	388 BLOOR STREET E., # 1603				
CITY-ST-ZIP	TORONTO, ON M4W3W9				
TITLE	V <input type="checkbox"/> Delete	<input type="checkbox"/> Change <input type="checkbox"/> Addition			
NAME	DENNIS, JAMES W				
STREET ADDRESS	7071 BAYVIEW AVE., SUITE 512				
CITY-ST-ZIP	THORNHILL, ON L3T7Y8				
TITLE	<input type="checkbox"/> Delete	<input type="checkbox"/> Change <input type="checkbox"/> Addition			
NAME					
STREET ADDRESS					
CITY-ST-ZIP					
TITLE	<input type="checkbox"/> Delete	<input type="checkbox"/> Change <input type="checkbox"/> Addition			
NAME					
STREET ADDRESS					
CITY-ST-ZIP					
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 reports 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:			27 JAN 2006 94923 2626 Date Daytime Phone #		
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR					