

2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

FILED
Mar 24, 2003 8:00 am
Secretary of State

03-24-2003 90185 012 ***150.00

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1. Entity Name
ANAN INTERNATIONAL, INC.



Principal Place of Business
613 RIDGE RD., #204 C
MONMOUTH JET, NJ 08852

Mailing Address
1631 TAYLOR RD
PORT ORANGE, FL 32124

00000000

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

22-3814295

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

PATEL, KIRIT R
1631 TAYLOR RD
PORT ORANGE, FL 32124

Name

Street Address (P.O. Box Number is Not Acceptable)

City

FL

Zip Code

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

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent Signature required when resigning)

DATE

9. Election Campaign Financing
Trust Fund Contribution ☐

\$5.00 May Be
Added to Fees

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE	NAME	STREET ADDRESS	CITY-ST-ZIP	☐ Delete
	PS	PATEL, KIRIT R	1631 TAYLOR RD PORT ORANGE, FL 32124	
TITLE	NAME	STREET ADDRESS	CITY-ST-ZIP	☐ Delete
TITLE	NAME	STREET ADDRESS	CITY-ST-ZIP	☐ Delete
TITLE	NAME	STREET ADDRESS	CITY-ST-ZIP	☐ Delete
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TITLE	NAME	STREET ADDRESS	CITY-ST-ZIP	☐ Delete

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11					
TITLE				☐ Change	☐ Addition
NAME					
STREET ADDRESS					
CITY-ST-ZIP					
TITLE				☐ Change	☐ Addition
NAME					
STREET ADDRESS					
CITY-ST-ZIP					
TITLE				☐ Change	☐ Addition
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TITLE				☐ Change	☐ Addition
NAME					
STREET ADDRESS					
CITY-ST-ZIP					
TITLE				☐ Change	☐ Addition
NAME					
STREET ADDRESS					
CITY-ST-ZIP					

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), 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: KIRIT PATEL
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

3/05/03 386-763-5026
Date Daytime Phone #

CP2E034 (10/02)