

**2006 FOR PROFIT CORPORATION
ANNUAL REPORT**

FILED
Jan 13, 2006 08:00 AM
Secretary of State

DOCUMENT # F04000002901

1. Entity Name
MARKAN GLOBAL ENTERPRISES INC.



Principal Place of Business
435 ROUTE 57
PORT MURRAY, NJ 07865

Mailing Address
435 ROUTE 57
PORT MURRAY, NJ 07865

DO NOT WRITE IN THIS SPACE



01042006 No Chg-P CR2E034 (11/05)

4. FEI Number
22-3117568

Applied For
Not Applicable

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

6. Name and Address of Current Registered Agent

BLISS, JEFFREY
1218 WINDMILL POINT ROAD
PALM HARBOR, FL 34685

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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

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

(NOTE: Registered Agent signature required when reinstating)

DATE

U00000386014
01/18/06-80040-018 150.00

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
P
SHARMA, KANWAR
51 HOAGLAND ROAD
BLAIRSTOWN, NJ 07825

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
V
SHARMA, RALPH
51 HOAGLAND ROAD
BLAIRSTOWN, NJ 07825

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
ST
SHARMA, MARLENE
51 HOAGLAND ROAD
BLAIRSTOWN, NJ 07825

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

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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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Kanwar S. Sharma

01/04/06 908-835-9008

Date

Daytime Phone #