

# 2004 FOR PROFIT CORPORATION ANNUAL REPORT (AR)

**FILED**  
**Apr 12, 2004 8:00 am**  
**Secretary of State**

04-12-2004 90678 031 \*\*\*150.00

**DOCUMENT # F17973**

1. Entity Name

ORNA, INC.



Principal Place of Business

1250 E HALLANDALE BCH BLVD  
BLD 503  
HALLANDALE FL 33009  
US

Mailing Address

143 MUIRFIELD  
NAPLES FL 34113  
US

2. Principal Place of Business

3. Mailing Address

2675 LEWIS LANE

Suite, Apt., #, etc.

#608

Suite, Apt., #, etc.

201

City & State

NAPLES FL

Zip

Country

Zip

34105

Country

US

4. FEI Number

59-2064656

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional  
Fee Required

6. Name and Address of Current Registered Agent

NAGAR, BELINA  
143 MUIRFIELD  
NAPLES FL 34113

7. Name and Address of New Registered Agent

Name BELINA - NAGAR

Street Address (P.O. Box Number is Not Acceptable)  
2675 LEWIS LANE #201

City NAPLES

FL

Zip Code 34105

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

*B. Nagar*

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

(NOTE: Registered Agent signature required when reinstating)

DATE

**FILE NOW!!! FEE IS \$150.00**

**After May 1, 2004 Fee will be \$550.00**

**Make Check Payable to Florida Department of State**

9. Election Campaign Financing  
Trust Fund Contribution. ☐

\$5.00 May Be  
Added to Fees

10. OFFICERS AND DIRECTORS

TITLE PT ☒ Delete  
NAME NAGAR, JACOB  
STREET ADDRESS 1250 E HALLANDALE BCH BLVD STE 608  
CITY-ST-ZIP HALLANDALE FL 33009

TITLE ST ☒ Delete  
NAME NAGAR, JACOB  
STREET ADDRESS 1250 E HALLANDALE BCH BLVD STE 608  
CITY-ST-ZIP HALLANDALE FL 33009

TITLE ☐ Delete  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Delete  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Delete  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Delete  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

11. 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 PRESIDENT ☐ Change ☒ Addition  
NAME BELINA NAGAR  
STREET ADDRESS 2675 LEWIS LANE #201  
CITY-ST-ZIP NAPLES FL 34105

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

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:

*B. Nagar*

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

4-1-04

Daytime Phone #

305-986-1189