2008 FOR PROFIT CORPORATION

FILED -ANNUAL REPORT Mar 10, 2008 08:00 AN **Secretary of State DOCUMENT # F49766** 1. Entity Name ROHAN ENTERPRISES, INC. Principal Place of Business Mailing Address 1531 CHATEAUWOOD DR 1531 CHATEAUWOOD DR CLEARWATER, FL 33764 US CLEARWATER, FL 33764 US 03082008 No Chg-P CR2E034 (11/05) DO NOT WRITE IN THIS SPACE Applied For 4. FEI Number 59-2140545 Not Applicable \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent HANSEN, ROLAND M DO NOT WRITE 1531 CHATEAUWOOD DR CLEARWATER, FL 33764 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, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) 9. Election Campaign Financing \$5.00 May Be FILE NOW!!! FEE IS \$150.00 Trust Fund Contribution. After May 1, 2008 Fee will be \$550.00 Added to Fees 10. OFFICERS AND DIRECTORS TITLE NAME HANSEN, ROLAND MJR. STREET ADDRESS 1531 CHATEAU WOOD DRIVE CLEARWATER, FL CITY-ST-ZiP TITLE U00000853332 HANSEN, MARY JOAN A NAME STREET ADDRESS 1531 CHATEAU WOOD DRIVE CITY-ST-ZIP CLEARWATER, FL TITLE NAME STREET ADDRESS DO NOT WRITE CITY-ST-ZIP IN THIS SPACE NAME STREET ADDRESS CITY-ST-ZIP NAME STREET ADDRESS

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 provered.

CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP

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