

# 2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F93000001247

Entity Name: ADNAN INVESTMENT & DEVELOPMENT, INC.

FILED  
Mar 18, 2008  
Secretary of State

**Current Principal Place of Business:**

109 AQUA RA DR  
JENSEN BCH., FL 34957 US

**New Principal Place of Business:**

**Current Mailing Address:**

109 AQUA RA DR  
JENSEN BCH., FL 34957

**New Mailing Address:**

FEI Number: 58-1455251      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )

**Name and Address of Current Registered Agent:**

ALGHITA, ADNAN K PRESIDE  
109 AQUA RD DR.  
JENSEN BCH., FL 34957 US

**Name and Address of New Registered Agent:**

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.

SIGNATURE:

Electronic Signature of Registered Agent

Date

**Election Campaign Financing Trust Fund Contribution ( ).**

**OFFICERS AND DIRECTORS:**

Title: PCD ( ) Delete  
Name: ALGHITA, ADNAN K PRES.  
Address: 109 AQUA RA DR.  
City-St-Zip: JENSEN BCH., FL 34957

Title: S ( ) Delete  
Name: ALGHITA, ADNAN K SEC.  
Address: 109 AQUA RA DR  
City-St-Zip: JENSEN BEACH, FL 34957

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated 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 electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: ADNAN ALGHITA

PRES

03/18/2008

Electronic Signature of Signing Officer or Director

Date