

**2007 FOR PROFIT CORPORATION
ANNUAL REPORT**

FILED
Apr 09, 2007 08:00 A
Secretary of State

DOCUMENT # G47619

1. Entity Name
TAJ INVESTMENT, INC.



Principal Place of Business
730 HAMILTON PLACE DR
LAKELAND, FL 33813 US

Mailing Address
730 HAMILTON PLACE DR
LAKELAND, FL 33813 US



03192007 No Chg-P CR2E034 (11/05)

DO NOT WRITE IN THIS SPACE

4. FEI Number
NOT APPLICABLE

Applied For
Not Applicable

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

6. Name and Address of Current Registered Agent

PATEL, CHHOTUBHAI N
730 HAMILTON PLACE DR
LAKELAND, FL 33813

**DO NOT WRITE
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

FILE NOW!!! FEE IS \$150.00
After May 1, 2007 Fee will be \$550.00

9. Election Campaign Financing
Trust Fund Contribution. ☐ \$5.00 May Be Added to Fees

10. OFFICERS AND DIRECTORS

TITLE PD
NAME PATEL, C.N.
STREET ADDRESS 730 HAMILTON PLACE DR
CITY-ST-ZIP LAKELAND, FL 33813

TITLE SD
NAME DEV, MAHENDRA
STREET ADDRESS 244 N FLORIDA AVE
CITY-ST-ZIP LAKELAND, FL

TITLE TD
NAME PATEL, K.K.
STREET ADDRESS 1406 U S 27 NORTH
CITY-ST-ZIP SEBRING, FL

TITLE VD
NAME PATEL, J.M.
STREET ADDRESS 1039 SUGAR TREE DR S
CITY-ST-ZIP LAKELAND, FL

TITLE PD
NAME PATEL, VINOD B. (2ND)
STREET ADDRESS 1406 US 27 NORTH
CITY-ST-ZIP SEBRING, FL

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

U000000694104
04/17/07-80005-003 150.00

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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

3/22/2007

Date

863 647 3368

Daytime Phone #