

# 2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# H88305

Entity Name: KAVIR, INC.

FILED  
Apr 07, 2009  
Secretary of State

## Current Principal Place of Business:

20 S. NOVA ROAD  
ORMOND BEACH, FL 32174 US

## New Principal Place of Business:

20 S. NOVA ROAD  
ORMOND BEACH, FL 32174 US

## Current Mailing Address:

20 S. NOVA ROAD  
ORMOND BEACH, FL 32174 US

## New Mailing Address:

346 CORNELL DRIVE  
DAYTONA BEACH, FL 32118 US

FEI Number: 59-2606428

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

FARZANRAD, LOLA M  
346 CORNELL DR  
DAYTONA BEACH, FL 32118 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: P ( ) Delete  
Name: FARZANRAD, MATTHEW H  
Address: 346 CORNELL DR  
City-St-Zip: DAYTONA BEACH, FL 32118

Title: V ( ) Delete  
Name: JORISSEN, ARIANA  
Address: 1661 HAMMOCK GROVE LANE  
City-St-Zip: JACKSONVILLE, FL 32225

Title: S ( ) Delete  
Name: CARRY, MANDANA  
Address: 2604 TULANE AVE APT #1  
City-St-Zip: DAYTONA BEACH, FL 32118

Title: T ( ) Delete  
Name: FARZANRAD, LOLA  
Address: 346 CORNELL DRIVE  
City-St-Zip: DAYTONA BEACH, FL 32118

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

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: LOLA M. FARZANRAD

T

04/07/2009

Electronic Signature of Signing Officer or Director

Date