

2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P00000046845

Entity Name: JITENDRA ENTERPRISES, INC.

FILED
Jan 12, 2008
Secretary of State

Current Principal Place of Business:

3205 SW PT ST LUCIE BLVD
PORT ST LUCIE, FL 34953

New Principal Place of Business:

Current Mailing Address:

3205 SW PT ST LUCIE BLVD
PORT ST LUCIE, FL 34953

New Mailing Address:

FEI Number: 65-1026948

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

PATHAK, NIRANJAN
332 NW STRATFORD LANE
PORT ST LUCIE, FL 34983 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: PD () Delete
Name: PRAJAPATI, JITENDRA K
Address: 690 SW HILLSBORO CIR
City-St-Zip: PT ST LUCIE, FL 34953

Title: DV () Delete
Name: PRAJAPATI, BHAVNA J
Address: 690 SW HILLSBORO CIR
City-St-Zip: PT ST LUCIE, FL 34953

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

Title: VPD (X) Change () Addition
Name: PRAJAPATI, BHAVNA J
Address: 690 SW HILLSBORO CIR
City-St-Zip: PT ST LUCIE, FL 34953

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: BHAVNA J PRAJAPATI

VPD

01/12/2008

Electronic Signature of Signing Officer or Director

_____ Date