## 2006 FOR PROFIT CORPORATION ANNUAL REPORT

## FILED Mar 20, 2006 8:00 am Secretary of State

					1 02 20 2004 00012 022 ***150 00				
DOCUMENT # P00000048779  1. Entity Name RAJUL, INC.					03-20-2006 90013 023 ***150.00				
Principal Place of Business Mailing Address									
404 N.E. 125 ST 404 N.E. 125 ST									
404 N.E. 125 51 N. MIAMI, FL 33181 N. MIAMI, FL 33181					ļ				
2. Principal Place of Business		3. Mailing Address				a pipela			
Suite, Apt. #, etc.		Suite, Apt. #, etc.			03022006	Chg-P	CR2E03	34 (11/05)	allad Fac
City & State		City & State Zip Country		<del></del>	4. FEI Number 65-10084	103		No	plied For Applicable
Zip	Country	Zip	Zip Couni		5. Certificate of	Status Desired		8.75 Add ee Required	
	6. Name and Address of Current	Registered Agent		T	7. Name and A	ddress of New Ro			
		Name							
BHUIYAN,									
16384 NW 16 STREET PEMBROKE PINES, FL 33028				Street Address (P.O. Box Number is Not Acceptable)					
	er Jenne de			City				Zip Code	
				City			FL	Zip Code	<b>.</b> .
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									
FILE NOW!!! FEE IS \$150.00  After May 1, 2006 Fee will be \$550.00  9. Election Campaign Financing \$5.00 May Be Trust Fund Contribution.   Added to Fees									
10. OFFICERS AND DIRECTORS 11.					ADDITIONS/C	HANGES TO OFFI	CERS AND	DIRECTORS	S IN 11
TITLE	V 95%	☐ Delete	THU					Change	Addition
NAME	UDDIN, CHOROAR		NAM	E					
STREET ADDRESS	12874; BISCAYNE BLVD			ET ADDRESS					
CITY-ST-ZIP	N. MIAMI, FL 33181		CITY	-ST-ZIP					
TITLE	D	☐ Delete	TITLE	:				☐ Change	Addition
NAME	BHUIYAN, MONIR H	□ péiéie	NAM					Onlings	
STREET ADDRESS	16384 NW 16 ST			ET ADDRESS					
CITY-ST-ZIP	PEMBROKE PINES, FL 33028			-ST-ZIP					
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NAME STREET ADDRESS				ET ADDRESS					Į
CITY-ST-ZIP				-ST-ZIP					
	north that the information supplied with	n this filing does not a set to			t in Chapter 110	Statistan 1	further co-	fu that the i-	Mormatica
12. Thereby certify that the information supplied with this filling 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.									