2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P00000105151

Entity Name: SANDILIEN, INC.

FILED Feb 15, 2009 Secretary of State

Current Principal Place of Business: New Principal Place of Business:

4600 SW 166TH AVE 4600 SW 166TH AVE

FT LAUDERDALE, FL 33331 SOUTHWEST RANCHES, FL 33331

Current Mailing Address: New Mailing Address:

4600 SW 166TH AVE 4600 SW 166TH AVE

FT LAUDERDALE, FL 33331 SOUTHWEST RANCHES, FL 33331

FEI Number: 65-1059926 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

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

SAROOP, GOPICHAN SAROOP, GOPICHAN MR. 4600 SW 166TH AVE 4600 SW 166TH AVE

FT LAUDERDALE, FL 33331 US SOUTHWEST RANCHES, FL 33331 US

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: GOPICHAN SAROOP 02/15/2009

> Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Delete Title: MRS (X) Change () Addition

SAROOP, SAVI SAROOP, SAVI Name: Name: Address:

4600 SW 166 AVENUE 4600 SW 166TH AVENUE Address:

City-St-Zip: FORT LAUDERDALE, FL 33331 City-St-Zip: SOUTHWEST RANCHES, FL 33331

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: GOPICHAN SAROOP 02/15/2009 MR.