

# 2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P00000114562

Entity Name: KHAN GUL, INC.

FILED  
Feb 06, 2009  
Secretary of State

## Current Principal Place of Business:

2205 WEST NORVELL BRYANT HWY  
LECANTO, FL 34416

## New Principal Place of Business:

## Current Mailing Address:

2205 WEST NORVELL BRYANT HWY  
LECANTO, FL 34416

## New Mailing Address:

FEI Number: 65-1060862

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

GULZAR, SANAM  
2205 W NORVELL BRYANT HWY  
LECANTO, FL 34416 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: PST ( ) Delete  
Name: GULZAR, SANAM  
Address: 7873 NW 191  
City-St-Zip: MIAMI, FL 33015

Title: ( ) Delete  
Name:  
Address:  
City-St-Zip:

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

Title: VP ( ) Change (X) Addition  
Name: KHAN, NIZAM  
Address: 219 SOUTH LINCOLN AVE  
City-St-Zip: BEVERLY HILLS, FL 34465

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: SANAM GULZAR

PST

02/06/2009

Electronic Signature of Signing Officer or Director

Date