2007 FOR PROFIT CORPORATION ANNUAL REPORT

FILED Mar 05, 2007 8:00 am Secretary of State

2-28-07

DOCUMENT # P0100003582 1. Enlity Name ANJAN ENTERPRISES, INC.					~	03-05-2007	_			
Delegiani Dina	a of Discionary	NA-11: A			ų.	· -				
Principal Place of Business		Mailing Address								
560 BOUGAINVILLEA LN		560 BOUGAINVILLEA LN								
VERO BEACH	, FL 32963	VERO BEACH, FL 3296	VERO BEACH, FL 32963							
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Principal Place of Business - No P.O. Box # 3. Mailing Address										
Z. i ilicipai i	lace of Business - 140 1 .C. Box #	5. Walling Address				0111 HEN 6014 03NN 03	30 30 00 			
Suite, Apt. #, etc.		Suite, Apt. #, etc.								
Suite, Apr. #, etc.		Suite, Apt. #, etc.		02232007	Chg-P	CR2E034	(12/06)			
City & State		City & State			4. FEI Number			100	aliad Car	
City & State		Oity d otate		•	4. FEI Number 65-1067	007		_ _ `	plied For	
7in	D Country Zip		Country		05-1007	097			t Applicable	
Zip	i Country I Zib I Cou		Coun	trv				1 75 Add		
		<u> </u>				7. Name and Address of New Registered Agent				
	6. Name and Address of Current		7. Name and A	Address of New F	Registered Age	<u>ent</u>				
	00410			Name						
MURRAY, CRAIG 560 BOUGAINVILLEA LN VERO BEACH, EL 2008				Street Address (P.O. Box Number is Not Acceptable)						
				Street Address (F.O. Box Number is Not Acceptable)						
VERO BEACH, FL 32963										
				City FL Zip Code						
9. The share comed entity submits this statement for the surpose of share in the										
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.										
and companions of registrated dyarm.										
SIGNATURE										
Signature, typed or printed name of registered agent and little if applicable (NOTE Registered Agent signature required when reinstating) DATE										
FILE NOW!!! FEE IS \$150.00 After May 1, 2007 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 OFF	FICERS AND DI	RECTORS	S IN 11	
TITLE	D	☐ Delete	TITLE	: T				Change	☐ Addition	
NAME	MURRAY, CRAIG		NAM	I			_	Jonango		
STREET ADDRESS	560 BOUGAINVILLEA LN			ET ADDRESS						
CITY-ST-ZIP	VERO BEACH, FL 32963			- \$1 - ZIP						
	VP		-					.		
THILE		☐ Delete	TITLE				L] Change	☐ Addition	
NAME	TUCKER, DIANA		NAM	l l						
STREET ADDRESS	560 BOUGAINVILLEA LN			ET ADDRESS						
CITY-ST-ZIP	VERO BEACH, FL 32963		CITY	-ST-ZIP						
TITLE		☐ Delete	TITLE	<u> </u>] Change	Addition	
NAME			NAM	E						
STREET ADDRESS			STRE	ET ADDRESS						
CITY-ST-ZIP			CITY	· ST - ZIP						
TITLE		☐ Delete	11111					Change	Addition	
NAME			NAM	E				- •	_	
STREET ADDRESS			STRE	ET ADDRESS						
CITY-ST-ZIP			CITY	-ST-ZIP						
TITLE		☐ Delete	яти	:				Change	Addition	
NAME		CT Delete	NAM				L	1 Onange	LJ Addition	
STREET ADDRESS CITY-ST-ZIP				ET ADDRESS						
				- ST-ZIP						
TITLE		Delete	TITLE] Change	Addition	
NAME			MAM							
STREET ADDRESS				ET ADDRESS						
CITY-ST-ZIP			CITY	-ST-ZIP						
12. I hereby certify that the information supplied with this filing 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.										

ENGLAND TYPES OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR