

**FOR PROFIT CORPORATION  
UNIFORM BUSINESS REPORT (UBR)**

**FILED**  
**Sep 03, 2002 8:00 am**  
**Secretary of State**

09-03-2002 90171 043 \*\*\*150.00

**DOCUMENT # P 01000045497**

1. Entity Name

**ANAA INVESTMENTS, INC.**

**DO NOT WRITE IN THIS SPACE**

2. Principal Place of Business

**P.O. BOX 1481**

3. Mailing Address

**P.O. BOX 1481**

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State  
**WINDERMERE, FL**

City & State  
**WINDERMERE, FL**

4. FEI Number

**59-3717600**

Applied For

Not Applicable

Zip  
**34782-1481**

Country  
**USA**

Zip  
**34782-1481**

Country  
**USA**

5. Certificate of Status Desired ☐

**\$8.75** Additional  
Fee Required

**DO NOT WRITE  
IN THIS SPACE**

7. Name and Address of Current Registered Agent

Name **INDAR, DAVE**

Street Address (P.O. Box Number is Not Acceptable)

**7640 APPLE TREE CIRCLE**

City **ORLANDO**

**FL**

Zip Code  
**32819**

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.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when re-registering)

DATE

9. This corporation is eligible to satisfy its Intangible  
Tax filing requirement and elects to do so.  
(See criteria on back) ☐

January 1 - May 1 Fee is \$150.00

After May 1, Fee is \$550.00

Amended UBR is \$61.25

Make Check Payable to Department of State

10. Election Campaign Financing  
Trust Fund Contribution. ☐

**\$5.00** May Be  
Added to Fees

11. OFFICERS AND DIRECTORS

TITLE	NAME	STREET ADDRESS	CITY-ST-ZIP
President	INDAR, DAVE	7640 APPLE TREE CIRCLE	ORLANDO FL 32819
Secretary	INDAR, SHRIMATI	7640 APPLE TREE CIRCLE	ORLANDO FL 32819

**DO NOT WRITE  
IN THIS SPACE**

13. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), 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 11 or on an attachment with an address, with all other like empowered.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

8/26/02

407 927 0646

Date

Daytime Phone #

CR2E034B (12/01)

*Attachment*

August 26, 2002

Florida Department of State  
Division of Corporations  
P. O. Box 1500  
Tallahassee, FL 32302-1500

Dear Sir/Madam:

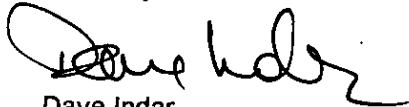
Re: ANAA, Inc.  
Document # P 01000045497

677608

This is to advise that we have not received our 2002 Uniform Business Report in the mail. Unfortunately, as a result, filing of this report was overlooked. We therefore, now enclose the UBR for the year 2002 along with the filing fee of \$150.00

We apologize for this error and request the abatement of any associated penalties. Your consideration is appreciated.

Sincerely



Dave Indar  
President