2	2008 FOR PROFIT ANNUAL	CORPORATIO	N				
	MENT # P010000540						
1. Entity Name RANIEH PACIFIC FINANCIAL INC.				FILED			
				08 APR 28 AM 9: 12			
Principal Place of Business Mailing Address 4945 S. ORANGE BLOSSOM TR. 4945 S. ORANGE BLOSSOM		D		SECRETA	RY OF STATE		
ORLANDO, FL 32839 ORLANDO, FL 32839			TALLAHASSEE, FLORIDA				
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F	O NOT WRITE	IN THIS SPA	CF	01082008	No Chg-P	CR2E034 (11/05)	
				4. FEI Number 59-3724		le contraction de la contracti	oplied For of Applicable
	•			5. Certificate o	f Status Desired	\$8.75 Ad Fee Require	
	6. Name and Address of Current R	egistered Agent					
RABBAT, ABBY 4945 SOBT				DO	NOT W	RITE	
ORLANDO, FL 32839				IN T	HIS SP	PACE	
			40 A.				i
	a named entity submits this statement for tions of registered agent.	the purpose of changing its registe	red office or register	red agent, or both		orida. I am familiar with	and accept
SIGNATURE							
			red Agent signature required	t when reinstating)		DATE	
	E NOW111 FEE IS \$150.00 ay 1, 2008 Fee will be \$550.0	9. Election Campaign Fine Trust Fund Contribution		.00 May Be led to Fees			
10. TITLE	OFFICERS AND D	IRECTORS			andillini yi A.v.		
NAME	RABBAT, ABBY						
STREET ADDRESS CITY - ST - ZIP	4945 S ORANGE BLOSSOM TRL ORLANDO, FL 32839	,		ÖÖ	01284	89660	
TITLE NAME	ST BRADWICK, LISA			057057	0801021-	-001 **438.	75
STREET ADDRESS	4945 S. ORANGE BLOSSOM TRA	AIL	a an an Albert an taon An an Albert an taon				
TTLE	ORLANDO, FL 32839				e de la construction de la constru Construction de la construction de l		
NAME STREET ADDRESS					NOTN		
CITY-ST-ZIP	· · · · · · · · · · · · · · · · · · ·			all here	NOT W	Aller I and the	
TITLE NAME				IN T	HIS SI	PACE	
STREET ADDRESS							
TITLE			- N.S				
NAME STREET ADDRESS CITY-ST-ZIP						1-	
NAME STREET ADDRESS CITY-ST-ZIP TITLE						m 5/5	
NAME STREET ADDRESS CITY-ST-ZIP						p5/5	

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. Rrs. 2-21-08