


2006 FOR PROFIT CORPORATION ANNUAL REPORT

FILED

Apr 26, 2006 08:00 AM
Secretary of State

DOCUMENT # P02000055710 1. Entity Name DEJA COMMUNICATIONS INC	
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Principal Place of Business 5045 CUMBERLAND LANE SPRING HILL, FL 34607	Mailing Address 5045 CUMBERLAND LANE SPRING HILL, FL 34607
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04082008 No Chg-P CR2E034 (11/05)

DO NOT WRITE IN THIS SPACE

4. FEI Number 03-0453273	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent ABDUL-RAHIM, RASHID 5045 CUMBERLAND LANE SPRING HILL, FL 34607

**DO NOT WRITE
IN THIS SPACE**

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.

SIGNATURE _____
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE _____

FILE NOW!!! FEE IS \$150.00
After May 1, 2006 Fee will be \$550.00

9. Election Campaign Financing Trust Fund Contribution. ☐ **\$5.00** May Be Added to Fees

1101000535198
05/08/06-80043-022 150.00

10. OFFICERS AND DIRECTORS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	P ABDUL-RAHIM, RASHID 5045 CUMBERLAND LANE SPRING HILL, FL 34607
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VPS ABDUL-RAHIM, EUNICE E 5045 CUMBERLAND LANE SPRING HILL, FL 34607
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IN THIS SPACE**

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.

SIGNATURE: *Rashid Abdul-Rahim* **X** *4/24/06* **X**
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #