

# **2012 FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P02000088008

Entity Name: CASPIAN, INC.

**FILED**  
**Mar 01, 2012**  
**Secretary of State**

**Current Principal Place of Business:**

8990 NW 49 PL  
CORAL SPRINGS, FL 33067

**New Principal Place of Business:**

8990 NW 49 PLACE  
CORAL SPRINGS, FL 33067

**Current Mailing Address:**

8990 NW 49 PL  
CORAL SPRINGS, FL 33067

**New Mailing Address:**

FEI Number: 55-0794583      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )

**Name and Address of Current Registered Agent:**

O'NEIL, DONNA S ESQ.  
301 EAST COMMERCIAL BLVD  
FORT LAUDERDALE, FL 33334      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

**OFFICERS AND DIRECTORS:**

Title: D  
Name: ROUHIZAD, SHAHPOUR  
Address: 8990 NW 49TH PLACE  
City-St-Zip: CORAL SPRINGS, FL 33067

Title: D  
Name: ROUHIZAD, ELIZABETH  
Address: 8990 NW 49TH PLACE  
City-St-Zip: CORAL SPRINGS, FL 33067

I hereby 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 all other like empowered.

SIGNATURE: SHAHPOUR ROUHIZAD

PRES

03/01/2012

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date