

# **2012 FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P02000124946

Entity Name: RAJDIP, INC.

**FILED**  
**Apr 27, 2012**  
**Secretary of State**

**Current Principal Place of Business:**

5790 EAST IRLO BRONSON HWY  
SAINT CLOUD, FL 347718441

**New Principal Place of Business:**

5790 ALLIGATOR LAKESHORE WEST  
SAINT CLOUD, FL 347718441

**Current Mailing Address:**

2030 LIVE OAK BLVD  
SAINT CLOUD, FL 347718441

**New Mailing Address:**

FEI Number: 22-3884840

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

PATEL, RAJESH C  
2030 LIVE OAK BLVD.  
SAINT CLOUD, FL 347718441 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: MR  
Name: PATEL, RAJESH C  
Address: 2030 LIVE OAK BLVD.  
City-St-Zip: SAINT CLOUD, FL 347718441

Title: D  
Name: PATEL, ILA R  
Address: 2030 LIVE OAK BLVD.  
City-St-Zip: SAINT CLOUD, FL 347718441

Title: D  
Name: PATEL, PRIYA C  
Address: 2030 LIVE OAK BLVD  
City-St-Zip: SAINT CLOUD, FL 34771

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: RCP

MR

04/27/2012

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

\_\_\_\_\_  
Date