

# 2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P03000080656

Entity Name: T & D RAN ENTERPRISES, INC

FILED  
Apr 08, 2007  
Secretary of State

**Current Principal Place of Business:**

7124 STIRLING RD.  
DAVIE, FL 33024 US

**New Principal Place of Business:**

**Current Mailing Address:**

7124 STIRLING RD.  
DAVIE, FL 33024 US

**New Mailing Address:**

FEI Number: 20-0109100

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

FISCHER, DIETRA L  
2842 SW 13 CT  
FORT LAUDERDALE, FL 33312 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

Election Campaign Financing Trust Fund Contribution ( ).

**OFFICERS AND DIRECTORS:**

Title: P ( ) Delete  
Name: FISCHER, DIETRA L  
Address: 2842 SW 13 CT  
City-St-Zip: FORT LAUDERDALE, FL 33312 US

Title: VP ( ) Delete  
Name: MAZOR, GALIT  
Address: 2512 MARATHON LANE  
City-St-Zip: FORT LAUDERDALE, FL 33312 US

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated 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 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 an address, with all other like empowered.

SIGNATURE: DIETRA FISCHER

P

04/08/2007

Electronic Signature of Signing Officer or Director

\_\_\_\_\_ Date