2008 FOR PROFIT CORPORATION
ANNUAL REPORT

DOCUMENT # P04000012134

1. Entity Name
DANJA'S INC.

Principal Place of Business	Mailing Address
10931 HAMMOCK DR. LARGO, FL 33774	10931 HAMMOCK DR. LARGO, FL 33774

DO NOT WRITE IN THIS SPACE

01222008   No Chg-P.   CR2E034 (11/05)

4. FEI Number	Applied For
20-0643714	Not Applicable

5. Certificate of Status Desired ☐ **$8.75** Additional Fee Required

6. Name and Address of Current Registered Agent

ANDERSON, PAUL E
10931 HAMMOCK DR.
LARGO, FL 33774

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, 2008 Fee will be $550.00**	9. Election Campaign Financing Trust Fund Contribution. ☐	**$5.00** May Be Added to Fees	

10.   OFFICERS AND DIRECTORS

TITLE	D
NAME	ANDERSON, PAUL E
STREET ADDRESS	10931 HAMMOCK DR.
CITY-ST-ZIP	LARGO, FL 33774

TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

U00000849499
03/21/08-80023-012 150.00

TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

DO NOT WRITE IN THIS SPACE

TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

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.

PRESIDENT   727-

SIGNATURE: _Paul E An_   PAUL E. ANDERSON   03-03-08   656-1454

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR   Date   Daytime Phone #