

2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P04000059950

Entity Name: APADANA INVESTMENTS, INC.

FILED
Apr 10, 2008
Secretary of State

Current Principal Place of Business:

824 WATERMAN RD S
JACKSONVILLE, FL 32207

New Principal Place of Business:

Current Mailing Address:

4123 UNIVERSITY BULD.S.
D.
JACKSONVILLE, FL 32216

New Mailing Address:

FEI Number: 20-0982375

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

VENUS, BAHMAN
824 WATERMAN RD S
JACKSONVILLE, FL 32207 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: D () Delete
Name: VENUS, BAHMAN
Address: 824 WATERMAN RD S
City-St-Zip: JACKSONVILLE, FL 32207

Title: D () Delete
Name: KHOSRAVI, HORMOZ
Address: 3265 FRONT RD
City-St-Zip: JACKSONVILLE, FL 32217

Title: D () Delete
Name: SAMIIAN, M. REZA
Address: 9134 BEAUCLERC CIR W
City-St-Zip: JACKSONVILLE, FL 32257

Title: D () Delete
Name: RAMEZANI, HOSSEIN
Address: P.O. BOX 365
City-St-Zip: ORANGE PARK, FL 32073

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

Title: D (X) Change () Addition
Name: KHOSRAVI, HORMOZ
Address: 3265 FRONT RD
City-St-Zip: JACKSONVILLE, FL 32257

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 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: H.KHOSRAVI

OFF

04/10/2008

Electronic Signature of Signing Officer or Director

Date