

# 2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P04000120762

Entity Name: LSNDJ ENTERPRISES, INC.

FILED  
Mar 14, 2006  
Secretary of State

**Current Principal Place of Business:**

1932 LAKE SEWARD DRIVE  
LAKELAND, FL 33813

**New Principal Place of Business:**

**Current Mailing Address:**  
POB 7843  
LAKELAND, FL 338077843

**New Mailing Address:**

1932 LAKE SEWARD DRIVE  
LAKELAND, FL 33813

FEI Number: 20-1521963      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )

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

SUSMITA, SHAH  
1932 LAKE SEWARD DR  
LAKELAND, FL 33813 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: SHAH, SUSMITA  
Address: 1932 LAKE SEWARD DR  
City-St-Zip: LAKELAND, FL 33813

Title: VP ( ) Delete  
Name: SHAH, DILIP  
Address: 1932 LAKE SEWARD DR  
City-St-Zip: LAKELAND, FL 33813

**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 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: SUSMITA SHAH

P

03/14/2006

Electronic Signature of Signing Officer or Director

Date