2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT # P04000169496

1. Entity Name JAHAN FOOD, INC.



Principal Place of Business

7928 WEST DRIVE

902

NORTH BAY VILLAGE, FL 33141

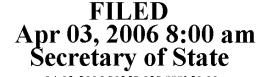
Mailing Address

7928 WEST DRIVE

902

DO NOT WRITE IN THIS SPACE

NORTH BAY VILLAGE, FL 33141



04-03-2006 90358 029 ***150.00



02032006

No Chg-P

CR2E034 (11/05)

4. FEI Number 20-2177474

Applied For Not Applicable

5. Certificate of Status Desired

\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

HORNSTEIN, BRUCE H 317-71 STREET MIAMI BEACH, FL 33141

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	named entity submits this statement for the pions of registered agent.	ourpose of changing its re	gistere	ed office or re	egistered agent, or bo	th, in the State of Florida. I am familiar with, and acco	ept
SĪGNATURE.	Signature, typed or printed name of registered agent and title	f applicable. (NOTE: R	registered	1 Agent signature	required when reinstating)	DATE	
FIL After M	E NOW!!! FEE IS \$150.00 ay 1, 2006 Fee will be \$550.00	9. Election Campaigr Trust Fund Contrib		cing	\$5.00 May Be Added to Fees		
10.	OFFICERS AND DIREC	CTORS					
TITLE NAME STREET ADDRESS CITY-ST-ZIP	P KHAN, NAZRUL I 7928 WEST DRIVE, #902 NORTH BAY VILLAGE, FL 33141						
TITLE NAME STREET ADDRESS CITY-ST-ZIP							
TITLE NAME STREET ADDRESS CITY-ST-ZIP					DO	NOT WRITE	
TITLE NAME STREET ADDRESS CITY-ST-ZIP					IN:	THIS SPACE	
TITLE NAME STREET ADDRESS CITY-ST-ZIP			, i				

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.

SIGNATURE:

NAME STREET ADDRESS CITY-ST-ZIP

NAZRULTKHAN 02/15/06

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR