## 2007 FOR PROFIT CORPORATION ANNUAL REPORT (AR)

changed, or on an attachm

SIGNATURE:

## Jul 20, 2007 8:00 am DOCUMENT # P06000036442 Secretary of State 1. Entity Name 07-20-2007 90018 033 \*\*\*158.75 RAJAN HOLDINGS, INC. Principal Place of Business Mailing Address 535 NW AMANDA STREET 535 NW AMANDA STREET LAKE CITY FL 32055 LAKE CITY FL 32055 2. Principal Place of Business - No PO Box # 3. Mailing Address Suite, Apt. #, etc. Surte, Apt. #, etc. 2nd MOORE CR2E034 (4/07) City & State City & State 4. FEI Number Applied For Not Applicable Zip Ζıρ Country Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Name LOGAN, RAYMOND A Street Address (P.O. Box Number is Not Acceptable) 535 NW AMANDA STREET LAKE CITY FL 32055 Zip Code 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 (NOTE: Registered Agent signature required when reinstating) FILE NOW!!! FEE IS \$550.00 S.607 193(2)(b), F.S., allows for the waiver of the \$400.00 9. Election Campaign Financing \$5.00 May Be DUE BY September 5, 2007 late fee. By checking this box, the corporation certifies it Trust Fund Contribution Added to Fees Make Check Payable to Florida Department of State did not receive prior notice. Fee to file is \$150.00. OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 10. TATLE ☐ Delete TITLE ☐ Change Addition LOGAN, RAYMOND A NAME MAME STREET ADDRESS 535 NW AMANDA STREET STREET ADDRESS CITY-ST ZIP AKE CITY FL 32055 CITY - ST - ZIP VΡ TITLE ☐ Delete TITLE Addition Change OGAN, RAYMOND A II NAME NAME 535 NW AMANDA STREET STREET ADDRESS STREET ADDRESS CITY-ST-ZIP AKE CITY FL 32055 CHTY-ST-ZIP Delete Change ■ Addition NAME OGAN, JANIS M STREET ADDRESS 535 NW AMANDA STREET STREET ADDRESS CITY-ST-789 LAKE CITY FL 32055 CITY-ST-7IP THTLE ☐ Delete Change ☐ Addition LOGAN, BRANDALYN M STREET ADDRESS 535 NW AMANDA STREET STREET ADDRESS CITY-ST-ZIP LAKE CITY FL 32055 CITY-ST-ZIP ☐ Delete ☐ Change ☐ Addition STREET ADDRESS STREET ADDRESS CITY-ST-7IP CITY-S1-ZIF TITLE ☐ Detete TITLE □ Change ■ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP 12. Thereby certify that the information supplied with this filling 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 of this tee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 10 or Block 11 if

FILED

To whom it may concern.

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We did not do any husiness lost year, so I have

no eposit to report. But we have spent many getting

things ready for it this year I hope.

Jone You

Royand A Joseph Rusidant

1-386-961-9363 officer you can leave a message is you need. something also. Vankyon.