2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P06000041788

Entity Name: ROHAN CORPORATION, INC.

FILED Apr 28, 2009 Secretary of State

Current Principal Place of Business: New Principal Place of Business:

5710 LENOX AVE., #906 8787 SOUTHSIDE BLVD JACKSONVILLE, FL 32205

4401

JACKSONVILLE, FL 32256

Current Mailing Address: New Mailing Address:

5710 LENOX AVE., #906 8787 SOUTHSIDE BLVD JACKSONVILLE, FL 32205

4401

JACKSONVILLE, FL 32256

FEI Number: 20-4286669 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

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

SHAH, PARAG G SHAH, PARAG G 5710 LENOX AVE., #906 8787 SOUTHSIDE BLVD

JACKSONVILLE, FL 32205 US

4401 JACKSONVILLE, FL 32256 US

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: 04/28/2009

> Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: (X) Change () Addition () Delete Title:

SHAH, PARAG G SHAH, PARAG G Name: Name: 5710 LENOX AVE., #906 8787 SOUTHSIDE BLVD # 4401 Address: Address:

City-St-Zip: JACKSONVILLE, FL 32205 City-St-Zip: JACKSONVILLE, FL 32256

VD Title: VD (X) Change () Addition Title: () Delete Name: SHAH, MEETA P Name: SHAH, MEETA P

5710 LENOX AVE., #906 8787 SOUTHSIDE BLVD # 4401 Address: Address:

JACKSONVILLE, FL 32205 JACKSONVILLE, FL 32256 City-St-Zip: City-St-Zip:

Title: Title: CEOD () Delete CEOD (X) Change () Addition

SHAH, ROHAN P SHAH, ROHAN P Name: Name:

5710 LENOX AVE., #906 8787 SOUTHSIDE BLVD # 4401 Address: Address: City-St-Zip: JACKSONVILLE, FL 32205 City-St-Zip: JACKSONVILLE, FL 32256

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: PARAG G SHAH PD 04/28/2009