2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P06000101082

Name:

Address:

City-St-Zip:

PATEL, TANUJA J

154, PEACOCK BLVD

PORT STLUICE, FL 34986

Entity Name: JAY MAHRAJ ENTERPRISE, INC

FILED Apr 24, 2009 Secretary of State

Current B	ringinal Plac	e of Business:	New Principal Place	New Principal Place of Business:	
	•	e of business.	New Fillicipal Flace	oi Busilless.	
	.UICE WEST LUICE, FL 34	1986			
C 10	lailimu Aululus		Nov. Molling Address		
	lailing Addre	:55.	New Mailing Address	New Maining Address.	
184, IRVIN PALMBAY	IE AVE , FL 32900				
FEI Number:	: 61-1511818	FEI Number Applied For ()	FEI Number Not Applicable ()	Certificate of Status Desired (X)	
Name and Address of Current Registered Agent:			Name and Address o	Name and Address of New Registered Agent:	
	IE AVE , FL 32900	US	purpose of changing its registered	d office or registered agent, or both,	
	e of Florida.	submits this statement for the	purpose of changing its registered	donice of registered agent, or both,	
SIGNATUR	RE:				
	Electro	nic Signature of Registered Ac	gent	Date	
Election Car	npaign Financi	ng Trust Fund Contribution ().			
OFFICERS AND DIRECTORS:			ADDITIONS/CHANGE	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:	
Title: Name: Address: City-St-Zip:	P (PATEL, KAMII 184,IRVINE A PALMBAY, FL	VE	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	PATEL, HARS 140 SW PEAG) Delete HAD M COCK BLVD.APT #103 CE, FL 34986 US	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title:	S () Delete	Title:	() Change () Addition	

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.

Name:

Address:

City-St-Zip:

SIGNATURE: KAMINI PATEL P 04/24/2009