

2008 FOR PROFIT CORPORATION AMENDED ANNUAL REPORT

DOCUMENT# P06000109832

Entity Name: ANPUJ INC

FILED
Sep 13, 2008
Secretary of State

Current Principal Place of Business:

438 ARCHAIC DR
WINTER HAVEN, FL 33880

New Principal Place of Business:

Current Mailing Address:

438 ARCHAIC DR
WINTER HAVEN, FL 33880

New Mailing Address:

FEI Number: 77-0664624

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

PATEL, HITESH C
438 ARCHAIC DR
WINTER HAVEN, FL 33880 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

OFFICERS AND DIRECTORS:

Title: MR () Delete
Name: PATEL, VINODCHANDRA M MR.
Address: 5042 CALLE DE SOL
City-St-Zip: ORLANDO, FL 32819

Title: V.P. (X) Delete
Name: PATEL, HITESH C MR.
Address: 438 ARCHAIC DRIVE
City-St-Zip: WINTER HAVEN, FL 33880

Title: S (X) Delete
Name: PATEL, JAYESH V MR.
Address: 5042 CALLE DE SOL
City-St-Zip: ORLANDO, FL 32819

Title: T (X) Delete
Name: PATEL, NIRAJ V MR.
Address: 5042 CALLE DE SOL
City-St-Zip: ORLANDO, FL 32819

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PRES (X) Change () Addition
Name: PATEL, HITESH C MR
Address: 438 ARCHAIC DRIVE
City-St-Zip: WINTER HAVEN, FL 33880

Title: () Change () Addition
Name:
Address:
City-St-Zip:

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: PHC

Electronic Signature of Signing Officer or Director

PRES

09/13/2008

Date