## 2009 FOR PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# P06000135581

City-St-Zip:

JENNINGSS, FL 32053

Entity Name: SONAL HEMANT CORPORATION

FILED Mar 30, 2009 Secretary of State

Current Pr	incipal Place	of Business:	New Prince	New Principal Place of Business:			
1186 HAMI JENNINGS	LTON AVE SS, FL 32053			ILTON AVE S, FL 32053			
Current Ma	ailing Addres	s:	New Maili	New Mailing Address:			
1186 HAMILTON AVE JENNINGSS, FL 32053			C/O KENN	PO BOX 1689 C/O KENNETH M DANIELS, CPA P.A. JASPER, FL 32052			
FEI Number:	20-5777749	FEI Number Applied For ( )	FEI Number Not App	licable()	Certificate of Status De	sired()	
Name and	Address of C	urrent Registered Agent:	Name and	Name and Address of New Registered Agent:			
	KENNETH M ( RAL AVE NW 'L 32052 U	_					
The above in the State		submits this statement for the p	ourpose of changing i	its registered o	office or registered age	nt, or both,	
SIGNATUR	RE:						
Electronic Signature of Registered Agent				Date			
Election Can	npaign Financing	Trust Fund Contribution ( ).					
OFFICERS	AND DIREC	rors:	ADDITION	IS/CHANGES	TO OFFICERS AND	DIRECTORS:	
Title: Name: Address: City-St-Zip:	VP () PATEL, HEMAN 1186 HAMILTON JENNINGS, FL	N AVENUE	Title: Name: Address: City-St-Zip:	(	) Change ( ) Addition		
Title: Name: Address: City-St-Zip:	VP () PATEL, SONALI 1186 HAMILTON JENNINGS, FL	N AVENUE	Title: Name: Address: City-St-Zip:	(	) Change ()Addition		
Title: Name: Address:	P () PATEL, BHIKHA 1186 HAMILTON		Title: Name: Address:	P (X PATEL, BHIKH 1186 HAMILTO			

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.

City-St-Zip:

JENNINGS, FL 32053

SIGNATURE: HEMANT D PATEL VP 03/30/2009