## 2009 FOR PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# P07000097089

Entity Name: PARYANIS INC

FILED Apr 30, 2009 Secretary of State

Current Principal Place of Business:				New Principal Place of Business:				
117 LAKE SUITE 308	EMERALD DR							
	PARK, FL 333	309	US					
Current Mailing Address:				New Maili	New Mailing Address:			
	EMERALD DR							
SUITE 308 OAKLAND	; PARK, FL 33(	309	US					
	26-0813133		Number Applied For ( )	FEI Number Not App	licable ( )	Certificate of Status Desired	d()	
Name and	Address of C		t Registered Agent:		, ,	f New Registered Agent:	. ,	
Maine and	Address of O	unci	t Registered Agent.	Haine and	Audiess o	i New Negistered Agent.		
SUITE 308	EMERALD DR		JS					
	named entity s of Florida.	ubmi	s this statement for the p	ourpose of changing i	ts registered	d office or registered agent, o	or both,	
SIGNATUF	RE:							
	Electron	ic Sig	nature of Registered Age	ent		Date		
Election Can	npaign Financing	Trust	Fund Contribution ( ).					
OFFICERS AND DIRECTORS:				ADDITION	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:			
Title: Name: Address: City-St-Zip:	P () PARYANI, KISH 117 LAKE EMEI OAKLAND PARI	RALD I	DR.,SUITE 308	Title: Name: Address: City-St-Zip:		( ) Change ( ) Addition		
Title:	VP ( )	Delete		Title:	VP	(X) Change ( ) Addition		
Name:	PARYANI, MARI		D OUTE OO	Name:	PARYANI, K			
Address: City-St-Zip:	117 LAKE EMEI OAKLAND PARI			Address: City-St-Zip:		MERALD DR.,SUITE 308 PARK, FL 33309 US		
Title:	SECR ()	Delete		Title:	SECR	(X) Change ( ) Addition		
Name:	PARYANI, MARI		_	Name:	PARYANI, K			
Address: City-St-Zip:	117 LAKE EMEI OAKLAND PARI			Address: City-St-Zip:		MERALD DR PARK, FL 33309 US		
Title: Name: Address:	PARYANI, KISH 117 LAKE EMEI	RALD I	DR., SUITE 308	Title: Name: Address:		() Change () Addition		
City-St-Zip:	OAKLAND PARI	K, FL:	33309 US	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: KISHAN PARYANI PRES 04/30/2009