

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P08000041547

FILED
Apr 27, 2009
Secretary of State

Entity Name: VANJARIA MANAGEMENT GROUP, INC.

Current Principal Place of Business:

4255 A1A SOUTH
SUITE 1314
ST. AUGUSTINE, FL 32085

New Principal Place of Business:

4255 A1A SOUTH
SUITE 3
ST. AUGUSTINE, FL 32080

Current Mailing Address:

4255 A1A SOUTH
SUITE 1314
ST. AUGUSTINE, FL 32085

New Mailing Address:

FEI Number: 26-2458853 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

ANSBACHER & MCKEEL, P.A.
8818 GOODBYS EXECUTIVE DRIVE
JACKSONVILLE, FL 32217 US

Name and Address of New Registered Agent:

ANSBACHER & MCKEEL, P.A.
8818 GOODBYS EXECUTIVE DRIVE
SUITE 100
JACKSONVILLE, FL 32217 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: _____

Electronic Signature of Registered Agent

04/27/2009

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: D () Delete
Name: VANJARIA, ABEED M
Address: 4255 A1A SOUTH #1314
City-St-Zip: ST. AUGUSTINE, FL 32085

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: D (X) Change () Addition
Name: VANJARIA, ABEED M
Address: 4255 A1A SOUTH, SUITE 3
City-St-Zip: ST. AUGUSTINE, FL 32080

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: ABEED VANJARIA

D

04/27/2009

Electronic Signature of Signing Officer or Director

Date