

2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P93000040357

Entity Name: RAYAN AND ASSOCIATES, INC.

FILED
Jan 29, 2006
Secretary of State

Current Principal Place of Business:

3190 DANTE DRIVE
209
ORLANDO, FL 32835

New Principal Place of Business:

Current Mailing Address:

P.O. BOX 691856
ORLANDO, FL 32869

New Mailing Address:

FEI Number: 59-3186876

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

RAYAN, GM
3190 DANTE DR UNIT 209
ORLANDO, FL 32835 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

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: PD () Delete
Name: RAYAN, GHAZI M
Address: 21 OAKDALE FARM RD
City-St-Zip: EDMOND, OK 73013

Title: O () Delete
Name: RAYAN, HODA
Address: 21 OAKDALE FARM RD
City-St-Zip: EDMOND, OK 73013

Title: O () Delete
Name: RAYAN, NADINE
Address: 21 OAKDALE FARM RD
City-St-Zip: EDMOND, OK 73013

Title: O () Delete
Name: RAYAN, BASIL
Address: 21 OAKDALE FARM RD
City-St-Zip: EDMOND, OK 73013

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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 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: GHAZI RAYAN

PD

01/29/2006

Electronic Signature of Signing Officer or Director

Date