

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P94000004209

Entity Name: KHAZARGEMS, INC.

FILED
Mar 24, 2009
Secretary of State

Current Principal Place of Business:

5781 LEE BLVD 208-430
LEHIGH ACRES, FL 33971 US

New Principal Place of Business:

Current Mailing Address:

5781 LEE BLVD 208-430
LEHIGH ACRES, FL 33971 US

New Mailing Address:

FEI Number: 59-3219541

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

LANDER, RANDY
5781 LEE BLVD 208-430
LEHIGH ACRES, FL 33971 US

Name and Address of New Registered Agent:

LANDER, RANDY VP
5781 LEE BLVD 208-430
LEHIGH ACRES, FL 33971 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: RANDY G LANDER

03/24/2009

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: LANDER, JAMES
Address: 5781 LEE BLVD 208-430
City-St-Zip: LEHIGH ACRES, FL 33971

Title: VTS () Delete
Name: LANDER, RANDY
Address: 5781 LEE BLVD 208-430
City-St-Zip: LEHIGH ACRES, FL 33971

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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: RANDY G LANDER

VTS

03/24/2009

Electronic Signature of Signing Officer or Director

Date