## 2007 FOR PROFIT CORPORATION \* **ANNUAL REPORT**

## DOCUMENT # P94000016426

1. Entity Name ISANYA OIL, INC.

Principal Place of Business

ORANGE PARK, FL 32073

1576 WELLS RD

Mailing Address

1576 WELLS RD

ORANGE PARK, FL 32073 US

**FILED** Apr 30, 2007 08:00 A Secretary of State



## DO NOT WRITE IN THIS SPACE

04192007

No Chg-P

CR2E034 (11/05)

4. FEI Number 59-3233979

Applied For Not Applicable

5. Certificate of Status Desired

\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

BHEKTA, HARISH 1576 WELLS RD ORANGE PARK, FL 32073

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	named entity submits this statement for the prions of registered agent.	urpose of changing	its registered o	ffice or re	egistered agent, or b	oth, in the	State of Flo	ida. I am fa	miliar with, and accept
SIGNATURE	Signature, typed or printed name of registered agent and title	l applicable (P	NOTE, Registered Age	ul signature	required when roustaling)			DATE	
	E NOW!!! FEE IS \$150.00 ay 1, 2007 Fee will be \$550.00	9. Election Cam Trust Fund C		· 🗆	\$5.00 May Be Added to Fees				
10.	OFFICERS AND DIREC	TORS			-			r	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD BHAKTA, HARISH 1762 BRITANY CT ORANGE PARK, FL							r.	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	SD BHAKTA, SHOBHNA 1762 BRITANY CT ORANGE PARK, FL			•			05/13	200007; 5707-81	42185 3059-010 150
TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE								RITE	

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 tryspee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP