


2008 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 30, 2008 08:00 AM
Secretary of State

DOCUMENT # P95000081358
 1. Entity Name
BARANN, INC.



Principal Place of Business Mailing Address
2601 13 AVE. W. **304 53RD ST W**
BRADENTON, FL 34205 **BRADENTON, FL 34209**

DO NOT WRITE IN THIS SPACE




03312008 No Chg-P CR2E034 (11/05)

4. FEI Number 65-0623590	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent
VELASQUEZ, EDWARD
304 53RD ST W
BRADENTON, FL 34209

DO NOT WRITE IN THIS SPACE

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE  **EDWARD VELASQUEZ, PDT** **April 24, 2008**
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reappointing) DATE

FILE NOW!!! FEE IS \$150.00
After May 1, 2008 Fee will be \$550.00

9. Election Campaign Financing Trust Fund Contribution. **\$5.00** May Be Added to Fees

10. OFFICERS AND DIRECTORS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	S KROGER, KARA 304 53RD ST W BRADENTON, FL 34209
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VD COOKE, NANCY 905 69TH AVE DR W BRADENTON, FL 34207
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PDT VALASQUEZ, EDWARD 304 53RD ST W BRADENTON, FL 34209
TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	

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 05/23/08-80064-023 150.00

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 trustee 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:  **EDWARD VELASQUEZ, PDT** **April 24, 2008** **741-720**
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone # **2803**