

# 2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P96000055093

Entity Name: KISHAN, INC.

FILED  
Apr 24, 2009  
Secretary of State

## Current Principal Place of Business:

508 E. MEMORIAL BLVD.  
LAKELAND, FL 33801 US

## New Principal Place of Business:

## Current Mailing Address:

508 E. MEMORIAL BLVD.  
LAKELAND, FL 33801 US

## New Mailing Address:

5139 DEESON PT CT  
LAKELAND, FL 33805 US

FEI Number: 59-3402559

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

PATEL, SUJATA  
5139 LAKE DEESON PT CT  
LAKELAND, FL 33805 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: VP ( ) Delete  
Name: PATEL, KSHAMA B  
Address: 6 TILIA CT  
City-St-Zip: STREAMWOOD, IL 60107

Title: S ( ) Delete  
Name: MEHTA, JITO  
Address: 2127 EDGEWATER CIRCLE, SOUTHEAST  
City-St-Zip: WINTER HAVEN, FL 33880

Title: T ( ) Delete  
Name: AMIN, DILIP P  
Address: 106 CASTLE CRT  
City-St-Zip: CLEMSON, SC 29631

Title: P ( ) Delete  
Name: PATEL, SUJATA H  
Address: 5139 LAKE DEESON POINTE  
City-St-Zip: LAKELAND, FL 33805

## 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 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: PATEL SUJATA H

P

04/24/2009

Electronic Signature of Signing Officer or Director

Date