· 2008 FOR PROFIT CORPORATION ANNUAL REPORT				FILED		
DOCUMENT # P97000029561 1. Entity Name ANJALI INVESTMENTS, INC.				Mar 06, 2008 08:00 AN Secretary of State		
7328 SW 48 ST 7		Aailing Address 7328 SW 48 ST MIAMI, FL 3355	·			
D	O NOT WRITE I		CE	03032008       No Chg-P       CR2E034 (11/05)         4. FEI Number 65-0743704       Applied For Not Applicable         5. Certificate of Status Desired       \$8.75 Additional Fee Required		
KHILNANI 3300 NW <sup>-</sup> MIAMI, FL	112 AVE		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 Signature, typed or printed name of registered agent and life if applicable (NOTE: Registered Agent algnature required when reinstating) DATE						
FIL After Ma	E NOW!!! FEE IS \$150.00 ay 1, 2008 Fee will be \$550.00	<ol> <li>Election Campaign Fina Trust Fund Contribution.</li> </ol>		.00 May Be led to Fees		
10. TITLE NAME STREET ADDRESS CITY-SI-ZIP TITLE	OFFICERS AND DIR PD KHILNANI, SURESH 3300 NW 112 AVE MIAMI, FL 33172 SD	ECTORS	-		U00000849182	
NAME STREET ADDRESS CITY-ST-ZIP TITLE	MEENU, KHILNANI 3300 NW 112 AVE MIAMI, FL 33172		-		03/21/08-80011-004 150.00	
NAME STREET ADDRESS CITY-ST-ZIP	REEI ADDRESS TY-ST-ZIP			DO NOT WRITE		
TITLE NAME STREET ADDRESS CITY - ST - ZIP				IN	THIS SPACE	
TITLE NAME STREET ADDRESS CITY - ST - ZIP						
TITLE NAME STREET ADDRESS CITY-ST-ZIP						
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: SIGNATURE: SIGNATURE AND TYPED OR PRINTED NAME OF BIONING OFFICER OR DIRECTOR Date Date Date						