

# **2011 FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P98000088162

Entity Name: CHITRANEE-A, INC.

**FILED**  
**Jan 10, 2011**  
**Secretary of State**

**Current Principal Place of Business:**

1003 BAY ESPLANADE  
CLEARWATER, FL 33767

**New Principal Place of Business:**

**Current Mailing Address:**

1003 BAY ESPLANADE  
CLEARWATER, FL 33767

**New Mailing Address:**

FEI Number: 59-3553534

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

**Name and Address of Current Registered Agent:**

DRAPKIN, ROBERT  
1003 BAY ESPLANADE  
CLEARWATER, FL 33767 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

**OFFICERS AND DIRECTORS:**

Title: PD  
Name: DRAPKIN, ROBERT L  
Address: 1003 BAY ESPLANADE  
City-St-Zip: CLEARWATER, FL 33767

Title: STD  
Name: DRAPKIN, CHITRANEE  
Address: 1003 BAY ESPLANADE  
City-St-Zip: CLEARWATER, FL 33767

I hereby 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 all other like empowered.

SIGNATURE: CHITRANEE DRAPKIN

VP

01/10/2011

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date