

**2004 FOR PROFIT CORPORATION
ANNUAL REPORT**

FILED

04 MAR -2 PM 1:49

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # P98000099508

1. Entity Name
RADHARAJ, INC.Principal Place of Business:
3225 S RIDGEWOOD AVE SUITE A
DAYTONA BEACH, FL 32119Mailing Address:
3225 S RIDGEWOOD AVE SUITE A
DAYTONA BEACH, FL 32119

03022004 No Chg-P CR2E034 (10/03) 04

4. FEI Number
59-3544537Applied For
Not Applicable5. Certificate of Status Desired ☐ \$8.75 Additional
Fee Required**DO NOT WRITE IN THIS SPACE**

8. Name and Address of Current Registered Agent

PATEL, BHADRESH I
104 FERNWOOD CIRCLE
DAYTONA BEACH, FL 32114**DO NOT WRITE
IN THIS SPACE**

9. 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 fee if applicable.

(NOTE: Registered Agent signature reads only when returning)

DATE

FILE NEW WITH FEE IS \$150.00
After May 1, 2004 Fee will be \$350.009. Election Campaign Financing
Trust Fund Contribution. ☐ \$5.00 May Be
Added to Fee

10. OFFICERS AND DIRECTORS

D
BHADRESH, PATEL I
104 FERNWOOD CIRCLE
DAYTONA BEACH, FL 32114TITLE
NAME
STREET ADDRESS
CITY - ST - ZIPTITLE
NAME
STREET ADDRESS
CITY - ST - ZIPTITLE
NAME
STREET ADDRESS
CITY - ST - ZIPTITLE
NAME
STREET ADDRESS
CITY - ST - ZIPTITLE
NAME
STREET ADDRESS
CITY - ST - ZIP**DO NOT WRITE
IN THIS SPACE**400030361224
03/12/04-01018-017- **150.00

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(1), 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 an incorporator 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, without other like endorsement.

SIGNATURE

SIGNATURE AND TYPE OR PRINTED NAME OF PERSON OFFICER OR DIRECTOR

Date

Daytime Phone #

3/3/04

15