2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P99000019888

Entity Name: MEGNA ENTERPRISES, INC.

SHABNAM, SHARMIN

HOLLYWOOD, FL 33023

210 S. STATE RD 7

Name:

Address:

City-St-Zip:

FILED Jan 30, 2008 Secretary of State

Current Principal Place of Business: New Principal Place of Business: 210 STATE RD. #7 HOLLYWOOD, FL 33023 **Current Mailing Address: New Mailing Address:** C/O MAS C/O MAS P O BOX 771210 3000 N. UNIVERSITY DRIVE SUITE E CORAL SPRINGS, FL 330071210 CORAL SPRINGS, FL 33065 FEI Number: 65-0899305 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired () Name and Address of Current Registered Agent: Name and Address of New Registered Agent: ANISUR RAHMAN, MOHAMMED 210 STATE RD. #7 HOLLYWOOD, FL 33023 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:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: Title: () Delete Title: () Change () Addition ANISUR RAHMAN, MOHAMMED Name: Name: 210 S STATE RD # 7 Address: Address: City-St-Zip: HOLLYWOOD, FL 33023 City-St-Zip: Title: VPD Title: () Delete () Change () Addition Name: KAOCHER, SHAHIN Name: 210 S STATE RD # 7 Address: Address: HOLLYWOOD, FL 33023 City-St-Zip: City-St-Zip: Title: Title: () Delete () Change () Addition JAHAN, NUSRAT Name: Name: 210 S. STATE RD 7 Address: Address: City-St-Zip: HOLLYWOOD, FL 33023 City-St-Zip: Title: () Delete Title: () Change () Addition

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.

Name:

Address:

City-St-Zip:

SIGNATURE: MOHAMMED ANISUR RAHMAN P 01/30/2008