## 2006 FOR PROFIT CORPORATION ANNUAL REPORT

	ANNUAL	REPURI							
1. Entity Nam	MENT # P990000410	82			FILED 06 MAY 16 PM 12: 2:				
Principal Place 6911 BRYAN LARGO, FL 3	DAIRY ROAD, STE 210	Mailing Address 6911 BRYAN DAIRY ROAD, STE 210 SUITE 160 LARGO, FL 33777				2119 18111 <b>28</b> 111 <b>88</b> 111 <b>2</b>			EDĀ
2. Principal Place of Business 12399 BELCHER ROAD SOUTH SUITE Apr # 40°.		3. Mailing Address 12399 BELCHER ROAD SOUTH SUITE #140		NUTH	04242006 Chg-P CR2E034 (11/05)				
City & State  LARGO, FL		City & State  LARGO, FL			4. FEI Number 59-3577				pplied For ot Applicable
Zip 33773	Country USA 6. Name and Address of Current R	Zip	Country USA			of Status Desired	Basistarad	\$8.75 Ad Fee Require	
TANEJA, J 6950 BRY/ LARGO, FI	IUGAL K AN DAIRY ROAD	Name Street A	treet Address (P.O. Box Number is Not Acceptable)						
	named entity submits this statement for ions of registered agent.  Sgrature typed or profed have of registered agent an		registered office or	-		n, in the State of F			, and accept
FILE NOW!!! FEE IS \$150.00 After May 1, 2006 Fee will be \$550.00  9. Election Campaign Fina Trust Fund Contribution					00 May Be d to Fees				
10. TITLE NAME STREET ADDRESS CITY-ST-ZIP	OFFICERS AND DIRECTORS  D TANEJA, JUGAL 6950 BRYAN DAIRY RD. LARGO, FL 33777  11.  Delete 11R NAM STR			ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11  Change Addition  10075204851  05/14/05-01035-012 **800.00					
TITLE NAME STREET ADDRESS CHY-ST-ZIP	S Delete ITITU SHUMAN, CANI 6911 BRYAN DAIRY ROAD, STE 210 LARGO, FL 33777 CITY			1239 LARC	SHUMAN, CANI 12399 BELCHER ROAD SOUTH, SUITE 140 LARGO, FL 33773				
TITLE  NAME  STREET ADDRESS  CITY-ST-ZIP	PCEO Delete ITTLE TANEJA, MANDEEP K 6911 BRYAN DAIRY ROAD, STE 210 LARGO, FL 33777 CITY			P CEO TANEJA, MANDEEP K 12399 BELCHER ROAD SOUTH, SUITE 140 LARGO, FL 33773					
HITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP					☐ Change	Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		Delete	THTLE NAME STREET ADDRESS CITY-ST-ZIP					☐ Change	☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP					☐ Change	Addition
indicated of the cor	certify that the information supplied with the on this report or supplemental report is poration or the receiver or trustee emport or on an attachment with an address, we	rue and accurate and that r wered to execute this report	my signature shall h as required by Cha	ave the sapter 607,	ame legal effect Florida Statutes	as if made unde	r oath; that I me appears	am an office	r or director