

# 2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# V29047

Entity Name: ANGNA, INC.

FILED  
Apr 16, 2006  
Secretary of State

**Current Principal Place of Business:**

6688 FLORIDA GEORGIA HWAY  
HAVANA, FL 32333

**New Principal Place of Business:**

**Current Mailing Address:**

6688 FLORIDA GEORGIA HWAY  
HAVANA, FL 32333

**New Mailing Address:**

FEI Number: 59-3117337

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

PATEL, MUKESH  
6688 FLORIDA GEORGIA HWAY  
HAVANA, FL 32333 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

Election Campaign Financing Trust Fund Contribution ( ).

**OFFICERS AND DIRECTORS:**

Title: P ( ) Delete  
Name: PATEL, CHANDRESH  
Address: 7132 WOODDED GORGE RD  
City-St-Zip: TALLAHASSEE, FL 32312

Title: S ( ) Delete  
Name: PATEL, SUNDABEN  
Address: 7132 WOODDED GORGE RD  
City-St-Zip: TALLAHASSEE, FL 32312

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the 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.

SIGNATURE: CHANDRESH PATEL

P

04/16/2006

Electronic Signature of Signing Officer or Director

\_\_\_\_\_ Date