

# 2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# V54580

Entity Name: SARDIN, INC.

FILED  
May 21, 2009  
Secretary of State

## Current Principal Place of Business:

9330 W HWY 192  
CLERMONT, FL 34711 US

## New Principal Place of Business:

## Current Mailing Address:

P. O. BOX 691484  
ORLANDO, FL 32869 US

## New Mailing Address:

FEI Number: 59-3135074

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

PATEL, BHARATKUMAR D  
9330 W. HWY 192  
CLERMONT, FL 347711 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

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: PSTD ( ) Delete  
Name: PATEL, BHARATKUMAR D.  
Address: 4350 FLORA VISTA DR.  
City-St-Zip: ORLANDO, FL 32837

Title: VD ( ) Delete  
Name: PATEL, SANJAYKUMAR  
Address: 5106 BRIGHTMOUR CIRCLE  
City-St-Zip: ORLANDO, FL 32837

Title: D ( ) Delete  
Name: PATEL, PALLAVI D.  
Address: 13883 OSPREY LINK RD APT 132  
City-St-Zip: ORLANDO, FL 32837

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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 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: BHARATKUMAR D. PATEL

PSTD

05/21/2009

Electronic Signature of Signing Officer or Director

Date