

2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# V63857

FILED
Apr 30, 2008
Secretary of State

Entity Name: VASWANI CORPORATION

Current Principal Place of Business:

11401 PINES BLVD
#270
PEMBROKE PINES, FL 33026 US

New Principal Place of Business:

Current Mailing Address:

PO BOX 820256
S FLORIA, FL 33082 US

New Mailing Address:

FEI Number: 65-0356505

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

VASWANI, SHAM K
243 SW 179TH AVE
PEMBROKE PINES, FL 33029 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: VASWANI, VIJAY
Address: 243 SW 179TH AVE
City-St-Zip: PEMBROOK PINES, FL 33026

Title: VP () Delete
Name: VASWANI, HARDEVI S
Address: 243 SW 179TH AVE
City-St-Zip: PEMBROKE PINES, FL 33029

Title: ST () Delete
Name: VASWANI, SHAM
Address: 243 SW 179TH AVE
City-St-Zip: PEMBROOK PINES, FL 33026

Title: D () Delete
Name: VASWANI, RAJESH
Address: 243 SW 179TH AVE
City-St-Zip: PEMBROOK PINES, FL 33026

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:

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: SHAM VASWANI

ST

04/30/2008

Electronic Signature of Signing Officer or Director

Date