

**2005 FOR PROFIT CORPORATION
ANNUAL REPORT**

FILED
Apr 22, 2005 8:00 am
Secretary of State

04-22-2005 90306 029 ***150.00

DOCUMENT # J18790

1. Entity Name

NEHAL INVESTMENTS, INC.



Principal Place of Business

RT-15 BOX 3025 4427 SW SR 47
LAKE CITY, FL 32024 US

Mailing Address

4427 SW SR 47
LAKE CITY, FL 32024 US

30042572



04192005

No Chg-P

CR2E034 (10/03)

4. FEI Number

59-2692400

Applied For

Not Applicable

5. Certificate of Status Desired



\$8.75 Additional
Fee Required

DO NOT WRITE IN THIS SPACE

6. Name and Address of Current Registered Agent

THAKOR, KAPURJI M.

RT-15 BOX 3025
LAKE CITY, FL 32024

4427 SW. S.R. 47
LAKE CITY, FL 32024

**DO NOT WRITE
IN THIS SPACE**

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

Signature, typed or printed name is registered agent and fee is applicable.

(NOTE: Registered Agent signature required when registering)

DATE

FILE NOW!!! FEE IS \$150.00
After May 1, 2005 Fee will be \$850.00

9. Election Campaign Financing
Trust Fund Contribution



**\$5.00 May Be
Added to Fees**

10. OFFICERS AND DIRECTORS

TITLE	P.
NAME	THAKOR, KAPURJI M.
STREET ADDRESS	RT-15 BOX 3025
CITY - ST - ZIP	LAKE CITY, FL 32024
TITLE	
NAME	
STREET ADDRESS	
CITY - ST - ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY - ST - ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY - ST - ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY - ST - ZIP	

**DO NOT WRITE
IN THIS SPACE**

2. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

Km. Thakor

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4-19-05

DATE

386-755-9306

EXPIRATION DATE