

2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# J84718

Entity Name: SHREE REALTY, INC.

FILED
Apr 03, 2004
Secretary of State

Current Principal Place of Business:

C/O WILLIAM J. HALEY, ESQ.
P.O. BOX 1029
LAKE CITY, FL 32056

New Principal Place of Business:

Current Mailing Address:

C/O ARVIND PATEL
4295 EISENHOWER CIRCLE
HOFFMAN ESTATES, IL 60195

New Mailing Address:

FEI Number: 59-2836357

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

HALEY, WILLIAM J., ESQ.
10 NORTH COLUMBIA STREET
LAKE CITY, FL 320561029

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: VD () Delete
Name: PATEL, VINOD,
Address: 212 HARRIS LAKE DR
City-St-Zip: LAKE CITY, FL 32055

Title: PDS () Delete
Name: PATEL, KHUSHROO E.,
Address: 2030 POST RD
City-St-Zip: NORTH BROOK, IL 60062

Title: PSD (X) Delete
Name: PATEL, ARVIND
Address: 4295 EISENMOUR
City-St-Zip: SCHAUMBURG, IL 60195

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 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 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: VINOD PATEL

VD

04/03/2004

Electronic Signature of Signing Officer or Director

Date