

2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P03000078211

Entity Name: BEVILLE GROUP, INC.

FILED
Apr 22, 2007
Secretary of State

Current Principal Place of Business:

2 SPRINGS MEADOWS DR.
ORMOND BEACH, FL 32174

New Principal Place of Business:

Current Mailing Address:

2 SPRINGS MEADOWS DR.
ORMOND BEACH, FL 32174

New Mailing Address:

FEI Number: 77-0604474

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

DESAI, MANISH
2 SPRINGS MEADOWS DR.
ORMOND BEACH, FL 32174 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: PD () Delete
Name: DESAI, HEMANT R
Address: 2 SPRING MEADOWS DR
City-St-Zip: ORMOND BEACH, FL 32174

Title: VD () Delete
Name: DESAI, MANISH
Address: 2 SPRINGS MEADOWS DR.
City-St-Zip: ORMOND BEACH, FL 32174

Title: SD () Delete
Name: DESAI, SURESH R
Address: 1625 WHITMORE STREET
City-St-Zip: SEBASTIAN, FL 32958

Title: TD () Delete
Name: PATEL, DHANANJAY
Address: 101 TYNEMOUTH DR
City-St-Zip: CARY, FL 27513

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 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: HEMANT DESAI

PT

04/22/2007

Electronic Signature of Signing Officer or Director

Date