


# 2007 FOR PROFIT CORPORATION ANNUAL REPORT (AR)

**FILED**  
**Apr 25, 2007 8:00 am**  
**Secretary of State**

04-25-2007 90191 035 \*\*\*150.00

DOCUMENT # <b>P05000033671</b>					
1. Entity Name <b>SHAGGY INC.</b>					
Principal Place of Business 2451 5TH AVENUE NORTH ST. PETERSBURG FL 33713			Mailing Address 2451 5TH AVENUE NORTH ST. PETERSBURG FL 33713		
2. Principal Place of Business - No P.O. Box #		3. Mailing Address			
Suite, Apt. #, etc.		Suite, Apt. #, etc.			
City & State		City & State		4. FEI Number <b>36-2040342</b>	
Zip		Country		Applied For Not Applicable	
5. Certificate of Status Desired <input type="checkbox"/>		5. Certificate of Status Desired <input type="checkbox"/> <b>\$8.75 Additional Fee Required</b>			
6. Name and Address of Current Registered Agent			7. Name and Address of New Registered Agent		
<b>PATEL, NARENDRA</b> <b>2876 29TH AVENUE NORTH</b> <b>ST. PETERSBURG FL 33713</b>			Name		
			Street Address (P.O. Box Number is Not Acceptable)		
			City		
			<div style="display: flex; justify-content: space-between;"> <span><b>FL</b></span> <span>Zip Code</span> </div>		
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 _____ (NOTE: Registered Agent signature required when reinstating) DATE _____					
<b>FILE NOW!!! FEE IS \$150.00</b> <b>After May 1, 2007 Fee Will Be \$550.00</b> <b>Make Check Payable to Florida Department of State</b>			9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> <b>\$5.00 May Be Added to Fees</b>		
10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11		
TITLE	<b>P</b>	<input type="checkbox"/> Delete	TITLE	<input type="checkbox"/> Change	<input type="checkbox"/> Addition
NAME	<b>PATEL, VARSHA</b>		NAME		
STREET ADDRESS	<b>2876 29TH AVENUE NORTH</b>		STREET ADDRESS		
CITY- ST- ZIP	<b>ST. PETERSBURG FL 33713</b>		CITY- ST- ZIP		
TITLE	<b>V</b>	<input type="checkbox"/> Delete	TITLE	<input type="checkbox"/> Change	<input type="checkbox"/> Addition
NAME	<b>JANMEJAY, PATEL</b>		NAME		
STREET ADDRESS	<b>2876 29TH AVE N</b>		STREET ADDRESS		
CITY- ST- ZIP	<b>SAINT PETERSBURG FL 33713</b>		CITY- ST- ZIP		
TITLE	<b>ED</b>	<input type="checkbox"/> Delete	TITLE	<input type="checkbox"/> Change	<input type="checkbox"/> Addition
NAME	<b>PATEL, CHINTAL N</b>		NAME		
STREET ADDRESS	<b>2875 29TH AVE, N</b>		STREET ADDRESS		
CITY- ST- ZIP	<b>SAINT PETERSBURG FL 33713</b>		CITY- ST- ZIP		
TITLE	<b>PATEL NARENDRA</b>	<input type="checkbox"/> Delete	TITLE	<input type="checkbox"/> Change	<input checked="" type="checkbox"/> Addition
NAME	<b>2876, 29th Ave N</b>		NAME		
STREET ADDRESS	<b>St Petersburg fl 33713</b>		STREET ADDRESS		
CITY- ST- ZIP			CITY- ST- ZIP		
TITLE		<input type="checkbox"/> Delete	TITLE	<input type="checkbox"/> Change	<input type="checkbox"/> Addition
NAME			NAME		
STREET ADDRESS			STREET ADDRESS		
CITY- ST- ZIP			CITY- ST- ZIP		
TITLE		<input type="checkbox"/> Delete	TITLE	<input type="checkbox"/> Change	<input type="checkbox"/> Addition
NAME			NAME		
STREET ADDRESS			STREET ADDRESS		
CITY- ST- ZIP			CITY- ST- ZIP		
12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Section 119, 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: <u>Narendra Patel</u>			Date: <u>4/13/07</u> Phone: <u>727-327-8784</u>		
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR			Date Daytime Phone #		