

# 2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P06000001045

Entity Name: KRISHNA DEVELOPMENT INC.

FILED  
Jan 05, 2008  
Secretary of State

## Current Principal Place of Business:

39 JACK DR  
QUINCY, FL 32352

## New Principal Place of Business:

## Current Mailing Address:

39 JACK DR  
QUINCY, FL 32352

## New Mailing Address:

FEI Number: 20-4037586

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

PATEL, PARESHRUMAR  
39 JACK DR  
QUINCY, FL 32352 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: PATEL, PARESHRUMAL C  
Address: 39 JACK DR  
City-St-Zip: QUINCY, FL 32352

Title: S ( ) Delete  
Name: PARESH, GOCOOOL M  
Address: 5238 WOODGATE WAY  
City-St-Zip: MARIANNA, FL 32446

Title: D ( ) Delete  
Name: PATEL, PRASANT  
Address: 10758 NW HWY 20 SR  
City-St-Zip: BRISTOL, FL 32321

Title: D ( ) Delete  
Name: PATEL, MRUGESH  
Address: 1350 W TENNESSEE ST  
City-St-Zip: TALLAHASSEE, FL 32304

Title: D ( ) Delete  
Name: PATEL, SARADKUMAR M  
Address: 5238 WOODGATE WAY  
City-St-Zip: MARIANNA, FL 32446

Title: D ( ) Delete  
Name: PATEL, HEMILDA  
Address: 5238 WOODGATE WAY  
City-St-Zip: MARIANNA, FL 32446

## 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:

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: PARESH PATEL

PRES

01/05/2008

Electronic Signature of Signing Officer or Director

Date