

**2007 FOR PROFIT CORPORATION  
ANNUAL REPORT**

**FILED**  
**Mar 26, 2007 08:00 AM**  
**Secretary of State**

**DOCUMENT # F96000005057**

1. Entity Name  
SHIV INN, INC.



Principal Place of Business  
3545 NW 58TH ST  
OKLAHOMA CITY, OK 73112

Mailing Address  
906 E BRANDON BLVD  
BRANDON, FL 33511 US

**DO NOT WRITE IN THIS SPACE**



03032007 No Chg-P CR2E034 (11/05)

4. FEI Number  
73-1395198

Applied For  
Not Applicable

5. Certificate of Status Desired



**\$8.75** Additional  
Fee Required

**6. Name and Address of Current Registered Agent**

PATEL, VASANT B  
906 E BRANDON BLVD  
BRANDON, FL 33511

**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 of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

**FILE NOW!!! FEE IS \$150.00**  
**After May 1, 2007 Fee will be \$550.00**

9. Election Campaign Financing  
Trust Fund Contribution.



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

**10. OFFICERS AND DIRECTORS**

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
DCP  
PATEL, CHAMPAK B  
1008 MANOR HILL DR  
NORMAN, OK 73072

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
DCV  
GOSSMAN, DEAN  
920 STONEGATE  
WEATHERFORD, OK 73096

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
DS  
PATEL, VASANT B  
906 E BRANDON BLVD  
BRANDON, FL 33511

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

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04/03/07-80057-007 158.75

**DO NOT WRITE  
IN THIS SPACE**

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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:**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

3/20/07

813-230-2168