

2007 FOR PROFIT CORPORATION ANNUAL REPORT (AR)


FILED

Feb 01, 2007 08:00 AM
Secretary of State



1st MOORE

CR2E034 (10/06)

DOCUMENT # F97000001504	
1. Entity Name GUPTA REALTY CORP.	

Principal Place of Business 3131 SOUTH RIDGEWOOD AVENUE SOUTH DAYTONA FL 32119	Mailing Address 3131 SOUTH RIDGEWOOD AVENUE SOUTH DAYTONA FL 32119
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2. Principal Place of Business - No P.O. Box #		3. Mailing Address	
Suite, Apt #, etc.		Suite, Apt #, etc.	
City & State		City & State	
Zip	Country	Zip	Country

6. Name and Address of Current Registered Agent
GUPTA, AVINASH GUPTA REALTY CORP. 3131 S. RIDGEWOOD AVE. SOUTH DAYTONA FL 32119

7. Name and Address of New Registered Agent
Name
Street Address (P.O. Box Number is Not Acceptable)
City
FL Zip Code

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 _____

FILE NOW!!! FEE IS \$150.00 After May 1, 2007 Fee Will Be \$550.00 Make Check Payable to Florida Department of State	9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees
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10. OFFICERS AND DIRECTORS	
TITLE NAME STREET ADDRESS CITY ST ZIP	<input type="checkbox"/> Delete
C GUPTA, POORNIMA 3131 SOUTH RIDGEWOOD AVENUE SOUTH DAYTONA FL 32119	
V SHARMA, VANDNA 3131 S RIDGEWOOD AVE S DAYTONA FL 32119	
<input type="checkbox"/> Delete	
<input type="checkbox"/> Delete	
<input type="checkbox"/> Delete	
<input type="checkbox"/> Delete	

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE NAME STREET ADDRESS CITY ST ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Add
U000000615942 02/07/07-80008-022 150.00	
<input type="checkbox"/> Change <input type="checkbox"/> Add	
<input type="checkbox"/> Change <input type="checkbox"/> Add	
<input type="checkbox"/> Change <input type="checkbox"/> Add	
<input type="checkbox"/> Change <input type="checkbox"/> Add	

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: A. Gupta Jan 18, '07
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #