## 2007 FOR PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# G75766

Entity Name: SARP, INC.

FILED Apr 09, 2007 Secretary of State

Current Principal Place of Business: New Principal Place of Business:

2535 STATE RD 16 ST AUGUSTINE, FL 32092

Current Mailing Address: New Mailing Address:

2535 STATE RD 16 ST AUGUSTINE, FL 32092

FEI Number: 59-2362918 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( )

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

PATEL, RAMU
2535 STATE ROAD 16
PATEL, SNEHAL R
2535 STATE ROAD 16

ST AUGUSTINE, FL 32092 US ST AUGUSTINE, FL 32092 US

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: SNEHAL R. PATEL 04/09/2007

Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ( ).

## **OFFICERS AND DIRECTORS:**

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PT ( ) Delete Title: P (X) Change ( ) Addition

 Name:
 PATEL, RAMU S.,
 Name:
 PATEL, SWATI R

 Address:
 2535 STATE ROAD 16
 Address:
 2535 STATE ROAD 16

 City-St-Zip:
 ST AUGUSTINE, FL
 ST AUGUSTINE, FL
 32092

 Address:
 2535 STATE ROAD 16
 Address:
 2535 STATE ROAD 16

 City-St-Zip:
 ST AUGUSTINE, FL
 City-St-Zip:
 ST AUGUSTINE, FL 32092

Title: DVP ( ) Delete Title: VST (X) Change ( ) Addition

Name: PATEL, SWATI Name: PATEL, SNEHAL R

Address: 2535 SR 16 Address: 2535 SR 16

City-St-Zip: SAINT AUGUSTINE, FL 32092 City-St-Zip: SAINT AUGUSTINE, FL 32092

Title: DVP (X) Delete Title: ( ) Change ( ) Addition

 Name:
 PATEL, SNEHAL
 Name:

 Address:
 2535 SR 16
 Address:

 City-St-Zip:
 SAINT AUGUSTINE, FL 32092
 City-St-Zip:

Title: D (X) Delete Title: ( ) Change ( ) Addition

 Name:
 PATEL, AMI
 Name:

 Address:
 2535 SR 16
 Address:

City-St-Zip: SAINT AUGUSTINE, FL 32092 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: SNEHAL R. PATEL V 04/09/2007