


**2005 FOR PROFIT CORPORATION
ANNUAL REPORT**

FILED
Apr 29, 2005 8:00 am
Secretary of State

04-29-2005 90278 014 ***150.00

DOCUMENT # G75773 1. Entity Name TATATECH, INC.	
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Principal Place of Business 1001 W. HAINES ST PLANT CITY, FL 33566	Mailing Address 1001 W. HAINES ST PLANT CITY, FL 33566
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DO NOT WRITE IN THIS SPACE



04242005 No Chg-P CR2E034 (10/03)

4. FEI Number 59-2350255	Applied For Not Applicable
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5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required
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6. Name and Address of Current Registered Agent BHARDWAJ, ASHOK 1001 S DR MLK BLVD PLANT CITY, FL 33566
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**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, 2005 Fee will be \$550.00

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	D VENKITESWARAN, V 2908 FOREST CLUB DR PLANT CITY, FL
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D KRISHNAKUMAR, R K MAHATMA GANDI ROAD MUMBA, INDIA,
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D ASHCROFT, L. DERRICK PO BOX 1526 N/A TRUTH OR CONSEQUENCES, NM
TITLE NAME STREET ADDRESS CITY-ST-ZIP	C KAVARANA, F.K. 24 HOMI MODI ST BOMBAY, IN
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD BHARDWAJ, ASHOK 1001 W DR MLK BLVD PLANT CITY, FL 33566
TITLE NAME STREET ADDRESS CITY-ST-ZIP	

**DO NOT WRITE
IN THIS SPACE**

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), 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:  **4-25-05** **813-754-2602**
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #