

# 2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# H49515

Entity Name: PRAPTI ENTERPRISES, INC.

FILED  
Apr 28, 2007  
Secretary of State

## Current Principal Place of Business:

4295 EISENHOWER CR.  
DES PLAINES, IL 600172536

## New Principal Place of Business:

## Current Mailing Address:

C/O VARSHA PATEL  
4295 EISENHOWER CR.  
HOFFMAN ESTATES, IL 60195

## New Mailing Address:

C/O ARVIND PATEL  
4295 EISENHOWER CR.  
HOFFMAN ESTATES, IL 60192

FEI Number: 59-2541405

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

HALEY, WILLIAM J.  
116 NW COLUMBIA AVENUE  
LAKE CITY, FL 32055 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, VARSHA,  
Address: 4295 EISENHOWER CIRCLE  
City-St-Zip: HOFFMAN ESTATES, IL

Title: ST ( ) Delete  
Name: PATEL, VARSHA  
Address: 4295 EISENHOWER CIR  
City-St-Zip: HOFFMAN ESTSTES, IL 60195

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change ( ) Addition  
Name: PATEL, ARVIND,  
Address: 4295 EISENHOWER CIRCLE  
City-St-Zip: HOFFMAN ESTATES, IL

Title: ST (X) Change ( ) Addition  
Name: PATEL, ARVIND  
Address: 4295 EISENHOWER CIR  
City-St-Zip: HOFFMAN ESTSTES, IL 60195

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: ARVIND PATEL

PD

04/28/2007

Electronic Signature of Signing Officer or Director

\_\_\_\_\_ Date