


**2006 FOR PROFIT CORPORATION
ANNUAL REPORT**

FILED
May 01, 2006 08:00 AM
Secretary of State

DOCUMENT # J13364
1. Entity Name
NAROTAM, INC.



Principal Place of Business ECONOMY INN 23750 U S HWY 301 N LAWTEY, FL 32058 US	Mailing Address ECONOMY INN 23750 U S HWY 301 N LAWTEY, FL 32059 US
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02102006 No Chg-P CR2E034 (11/05)

DO NOT WRITE IN THIS SPACE

4. FEI Number 59-2681883	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent
**PATEL, SUKANYA
ECONOMY INN
US HWY #301 NORTH
LAWTEY, FL 32058**

**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 _____ DATE _____
Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating)

**FILE NOW!!! FEE IS \$150.00
After May 1, 2006 Fee will be \$550.00**

9. Election Campaign Financing Trust Fund Contribution. **\$5.00** May Be Added to Fees

1100000555107
05/16/06-80017-015 150.00

10. OFFICERS AND DIRECTORS

TITLE NAME STREET ADDRESS CITY-ST-ZIP	P PATEL, SUKANYA M MRS. 23750 HWY 301 NORTH LAWTEY, FL 32058
TITLE NAME STREET ADDRESS CITY-ST-ZIP	V PATEL, MAGAN J MR. 23750 HWY 301 NORTH LAWTEY, FL 32058
TITLE NAME STREET ADDRESS CITY-ST-ZIP	ST PATEL, KIRTI M MS. 23750 HWY 301 NORTH LAWTEY, FL 32058
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TITLE NAME STREET ADDRESS CITY-ST-ZIP	

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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: Magan Patel **MAGAN PATEL** 04-28-06 904-782-3332
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #