

# 2012 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# J74255

FILED  
Apr 30, 2012  
Secretary of State

**Entity Name:** TATA TEA EXTRACTIONS INC

**Current Principal Place of Business:**

1001 W DR M.L. KING JR BLVD  
PLANT CITY, FL 33566 US

**New Principal Place of Business:**

**Current Mailing Address:**

1001 W DR M.L. KING JR BLVD  
PLANT CITY, FL 33566 US

**New Mailing Address:**

**FEI Number:** 59-2809920

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

SANKARARAMAN, RAVI  
1001 DR M L K BLVD  
PLANT CITY, FL 33566 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

**OFFICERS AND DIRECTORS:**

**Title:** DP  
**Name:** SANKARARAMAN, RAVI  
**Address:** 1001 DR M L K BLVD  
**City-St-Zip:** PLANT CITY, FL 33566

**Title:** CD  
**Name:** KAVARANA, F K  
**Address:** 24 HOM MODY ST.  
**City-St-Zip:** BOMBAY, IN

**Title:** D  
**Name:** GANDHI, ARUN  
**Address:** 24 HOMI MODY ST  
**City-St-Zip:** CALCUTTA INDIA, IN

**Title:** D  
**Name:** KRISHNA, KUMAR R K  
**Address:** MAHATMA GANDHI ROAD  
**City-St-Zip:** MUMBAI, INDIA,

**Title:** D  
**Name:** SIGANPORIA, PERCY T  
**Address:** 1 BISHOP LE FROY RD  
**City-St-Zip:** CALCUTTA, IN

I hereby 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 all other like empowered.

**SIGNATURE:** RAVI SANKARARAMAN

PRES

04/30/2012

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date