## 2007 FOR PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# K69199

Entity Name: INDUS INVESTMENTS, INC.

FILED Apr 21, 2007 Secretary of State

Current Pr	incipal Place of E	Business:	New Principal F	New Principal Place of Business:		
	PATEL INCOAST BLVD. RIVER, FL 34429	US	MAYUR N PATE 1610 SE PARAD CRYSTAL RIVEF	ISE CIRCLE		
Current Ma	ailing Address:		New Mailing Ad	New Mailing Address:		
	ARADISE CIRCLE RIVER, FL 34429	US				
FEI Number:	33-6645287 FE	Number Applied For()	FEI Number Not Applicable	( ) Certificate of Status D	esired ( )	
Name and	Address of Curre	nt Registered Agent:	Name and Addr	ess of New Registered Age	ent:	
	AYUR ARADISE CIRCLE RIVER, FL 34429	US				
The above in the State	named entity subm	its this statement for the pu	rpose of changing its regi	istered office or registered ag	ent, or both,	
SIGNATUR	RE:					
	Electronic Si	gnature of Registered Ager	nt	Date		
Election Cam	npaign Financing Trus	st Fund Contribution ( ).				
OFFICERS AND DIRECTORS:			ADDITIONS/CH	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:		
Title: Name: Address: City-St-Zip:	D ( ) Delet DESAI, PARESH, 3475 S SUNCOAST E HOMOSASSA SPRIN	BLVD	Title: Name: Address: City-St-Zip:	() Change () Addition		
Title: Name: Address: City-St-Zip:	D ( ) Delet POTU, PRASAD, 700 SE 5TH TER CRYSTAL RIVER, FL		Title: Name: Address: City-St-Zip:	()Change ()Addition		
Title: Name: Address: City-St-Zip:	D () Delet SHUKLA, MANOJ, 9030 W FOR ISLAND CRYSTAL RIVER, FL	TRAIL	Title: Name: Address: City-St-Zip:	( ) Change ( ) Addition		
Title: Name: Address: City-St-Zip:	D () Delet IYER, HARI, 3475 S SUNCOAST E HOMOSASSA SPRIN	BLVD	Title: Name: Address: City-St-Zip:	() Change () Addition		
Title: Name: Address: City-St-Zip:	D ( ) Delet PATEL, KAMLESH, 2380 N.W. HWAY 19 CRYSTAL RIVER, FL		Title: Name: Address: City-St-Zip:	() Change () Addition		
Title: Name: Address: City-St-Zip:	D ( ) Delet MAYUR, PATEL 1610 SE PARADISE CRYSTAL RIVER, FL	CIRCLE	Title: Name: Address: City-St-Zip:	( ) Change ( ) Addition		

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: MAYUR N PATEL D 04/21/2007