

2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# L31594

**FILED
Apr 16, 2004
Secretary of State**

Entity Name: JAYSHREE HOLDINGS, INC.

Current Principal Place of Business:

930 CARTER ROAD
SUITE #236
WINTER GARDEN, FL 34787 US

New Principal Place of Business:

18830 STATE ROAD 19
GROVELAND, FL 34736 US

Current Mailing Address:

PO BOX 397
GROVELAND, FL 34736 US

New Mailing Address:

PO BOX 397
GROVELAND, FL 34736 US

FEI Number: 65-0202479 **FEI Number Applied For ()** **FEI Number Not Applicable ()** **Certificate of Status Desired ()**

Name and Address of Current Registered Agent:

BHAGANI, SUDHIR
15501 CATHERINE CIR
GROVELAND, FL 34736 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: PT () Delete
Name: BHAGANI, SUDHIR,
Address: 15501 CATHERINE CIR
City-St-Zip: GROVELAND, FL 34736

Title: VS () Delete
Name: BHAGANI, JAYSHREE,
Address: 15501 CATHERINE CIR
City-St-Zip: GROVELAND, FL 34736

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the 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 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: SUDHIR BHAGANI

PT

04/16/2004

Electronic Signature of Signing Officer or Director

_____ Date