2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# M86818

FILED Apr 26, 2006 Secretary of State

Entity Name: EMANDI COMMERCIAL PROPERTIES, INC.

Current Principal Place of Business: New Principal Place of Business:

13904 LAKESHORE BLVD. SUITE 410

HUDSON, FL 34667

New Mailing Address: Current Mailing Address:

13904 LAKESHORE BLVD #410

HUDSON, FL 34667 US

FEI Number: 59-2902671 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

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

EMANDI, VARALAXMI EMANDI, VARALAXMI 5723 WÉST SHORE DRIVE 5723 WÉST SHORE DRIVE NEW PORT RICHEY, FL 34652 US US NEW PORT RICHEY, FL 34652

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: VARALAXMI EMANDI 04/26/2006

> Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Delete Title: (X) Change () Addition EMANDI, VARALAXMI, EMANDI, VARALAXMI Name: Name: 5723 WEST SHORE DRIVE 5723 WEST SHORE DRIVE Address: Address: City-St-Zip:

NEW PORT RICHEY, FL City-St-Zip: NEW PORT RICHEY, FL

Title: Title: VΡ (X) Change () Addition () Delete EMANDI, V RAO Name: EMANDI, VARALAXMI, Name:

5723 WEST SHORE DRIVE 5723 WEST SHORE DRIVE Address: Address: NEW PORT RICHEY, FL NEW PORT RICHEY, FL City-St-Zip: City-St-Zip:

Title: Title: DVP (X) Delete () Change () Addition

EMANDI, RAO V. Name: Name: 5723 WESTSHORE DRIVE Address: Address: City-St-Zip: NEW PORT RICHEY, FL City-St-Zip:

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: VARALAXMI EMANDI **PST** 04/26/2006