2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N03000004116

Entity Name: SHREE VRAJBHOOMI FOUNDATION, INC.

FILED Mar 11, 2007 Secretary of State

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

901 BAYSHORE BLVD 3113 MOSSVALE LN TAMPA, FL 33606 TAMPA, FL 33618

Current Mailing Address: New Mailing Address:

3233 E YUKON ST 3113 MOSSVALE LN TAMPA, FL 33604 TAMPA, FL 33618

FEI Number: 30-0173339 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:

VIJAPURA, MINAXI A
3233 E YUKON ST
TAMPA, FL 33604 US
VIJAPURA, MINAXI A
3113 MOSSVALE LANE
TAMPA, FL 33618 US

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: MINAXI VIJAPURA 03/11/2007

Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: D () Delete Title: D (X) Change () Addition Name: VIJAPURA, MINAXI A Name: VIJAPURA, MINAXI A

 Address:
 3233 E YUKON ST
 Address:
 3113 MOSSVALE LN

 City-St-Zip:
 TAMPA, FL 33604
 City-St-Zip:
 TAMPA, FL 33618

Title: D () Delete Title: D (X) Change () Addition Name: VIJAPURA, ASHIT K Name: VIJAPURA, ASHIT K

 Name
 VIJAPORA, ASHT K
 Name
 VIJAPORA, ASHT K

 Address:
 3233 E YUKON DY
 Address:
 3113 MOSSVALE LN

 City-St-Zip:
 TAMPA, FL 33604
 City-St-Zip:
 TAMPA, FL 33618

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

 Name:
 SWAMI, SHASTRI
 Name:

 Address:
 ASHRAM MOGAR
 Address:

 City-St-Zip:
 GURAJAT, INDIA, OC
 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 617, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: MINAXI VIJAPURA D 03/11/2007