

# 2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N07000004987

FILED  
Aug 18, 2009  
Secretary of State

**Entity Name:** PATELWORKS DANCE THEATER, INC.

**Current Principal Place of Business:**

5930 BUFORD ST  
ORLANDO, FL 32835

**New Principal Place of Business:**

709 GATEWAY LANE  
TAMPA, FL 33613

**Current Mailing Address:**

5930 BUFORD ST  
ORLANDO, FL 32835

**New Mailing Address:**

709 GATEWAY LANE  
TAMPA, FL 33613

**FEI Number:** 26-2713817      **FEI Number Applied For ( )**      **FEI Number Not Applicable ( )**      **Certificate of Status Desired ( )**  
In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

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

PATEL, SMRUTI  
5930 BUFORD ST  
ORLANDO, FL 32835      US

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

JANI, SMRUTI P  
709 GATEWAY LANE  
TAMPA, FL 33613      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: SMRUTI JANI

08/18/2009

Electronic Signature of Registered Agent

Date

**OFFICERS AND DIRECTORS:**

Title: MS.      ( ) Delete  
Name: PATEL, SMRUTI D  
Address: 5930 BUFORD ST.  
City-St-Zip: ORLANDO, FL 32835

Title: MR.      ( ) Delete  
Name: JANI, ASIM A  
Address: 5930 BUFORD ST  
City-St-Zip: ORLANDO, FL 32835

Title: MR.      ( ) Delete  
Name: PATEL, SANDEEP D  
Address: PO BOX 58  
City-St-Zip: SISSETON, SD 57262

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: MS.      (X) Change ( ) Addition  
Name: JANI, SMRUTI P  
Address: 709 GATEWAY LN  
City-St-Zip: TAMPA, FL 33613

Title: MR.      (X) Change ( ) Addition  
Name: JANI, ASIM A  
Address: 709 GATEWAY LN  
City-St-Zip: TAMPA, FL 33613

Title: MR.      (X) Change ( ) Addition  
Name: PATEL, SANDEEP D  
Address: 2217 OLIVER AVE S  
City-St-Zip: MINNEAPOLIS, MN 55405

I hereby certify that the information supplied with this filing does not qualify 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: SMRUTI JANI

MS

08/18/2009

Electronic Signature of Signing Officer or Director

Date