


**2007 FOR PROFIT CORPORATION
ANNUAL REPORT**

FILED
Feb 01, 2007 08:00 AM
Secretary of State

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| DOCUMENT # P00000033173 1. Entity Name PRIYAH LIMITED, INC. |  |
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| Principal Place of Business 4614 S ORANGE BLOSSOM TRL # 4616 ORLANDO, FL 32821 | Mailing Address 4614 S ORANGE BLOSSOM TRL # 4616 ORLANDO, FL 32821 |
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01102007 No Chg-P CR2E034 (11/05)

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| 4. FEI Number 59-3635995 | Applied For Not Applicable |
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|---|--|
| 5. Certificate of Status Desired <input type="checkbox"/> | \$8.75 Additional Fee Required |
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| 6. Name and Address of Current Registered Agent HARJANI, RAJESH F 4614 S ORANGE BLOSSOM TRL # 4616 ORLANDO, FL 32839 |
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IN THIS SPACE**

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE _____
Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating)

000000615021
02/06/07 00055 003 150.00

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| FILE NOW!!! FEE IS \$150.00 After May 1, 2007 Fee will be \$550.00 | 9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees |
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| 10. OFFICERS AND DIRECTORS | |
|--|---|
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | PSD HARJANI, RAJESH F 4614 S ORANGE BLOSSOM TR, # 4616 ORLANDO, FL 32839 |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | VP HARJANI, RAMESH 4614 S ORANGE BLOSSOM TR, # 4616 ORLANDO, FL 32839 |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | VP HARJANI, DURU 4614 S ORANGE BLOSSOM TR, # 4616 ORLANDO, FL 32839 |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | |

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IN THIS SPACE**

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:  **1/31/07 407 856-5896**
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #