2005 FOR PROFIT CORPORATION ANNUAL REPORT

Apr 23, 2005 08:00 AM Secretary of State **DOCUMENT # P00000097601** 1. Entity Name SHREE RANG INVESTMENT INC. Principal Place of Business Mailing Address 4601 W. KINGS STREET 4601 W. KINGS STREET COCOA, FL 32926 COCOA, FL 32926 No Chg-P CR2E034 (10/03) DO NOT WRITE IN THIS SPACE Applied For 4. EEI Number 59-3677354 Not Applicable \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent PATEL, BHARATKUMAR C DO NOT WRITE 4601 W. KINGS STREET COCOA, FL 32926 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 Sgnature, typod or printed name of registered agent and title if applicable DATE (NOTE: Registered Agent signature required when retratating) 9. Election Campaign Financing \$5.00 May Be FILE NOW!!! FEE IS \$150.00 After May 1, 2005 Fee will be \$550.00 Trust Fund Contribution. Added to Fees OFFICERS AND DIRECTORS 10. D TITLE PATEL BHARATKUMAR C NAME 4601 W. KINGS STREET STREET ADDRESS CITY-ST-ZIP COCOA, FL 32926 TITLE PATEL, MINAXIBEN B NAME STREET ADDRESS 4601 W KING STREET CITY-ST-ZIP COCOA, FL 32926 TITLE NAME STREET ADDRESS DO NOT WRITE CITY-ST-ZIP IN THIS SPACE TITLE NAME STREET ADDRESS CITY - ST - ZIP RITLE NAME STREET ADDRESS CATY-SA-ZAP nne NAME STREET ADDRESS CITY-S1-21P

12. I hereby certify that the miormation supplied with this filling does not qualify 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 signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or libe 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:

BHARAT PATEL

VPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

04.20.05

221-636-8139.

Date

Dayting Phone #

FILED