


# 2006 FOR PROFIT CORPORATION ANNUAL REPORT

**FILED**  
**May 01, 2006 08:00 AM**  
**Secretary of State**

DOCUMENT # P01000007951 1. Entity Name RUCHI ENTERPRISES, INC.	
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Principal Place of Business 2018 S CHICKASAW TR ORLANDO, FL 32825	Mailing Address 2018 S CHICKASAW TR ORLANDO, FL 32825
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04212006 No Chg-P CR2E034 (11/05)

**DO NOT WRITE IN THIS SPACE**

4. FEI Number 59-3692027	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

SHAH, VISHAKHA  
2018 S CHICKASAW TR  
ORLANDO, FL 32825

**DO NOT WRITE 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 \_\_\_\_\_ (NOTE: Registered Agent signature required when reinstating) \_\_\_\_\_ DATE \_\_\_\_\_

**FILE NOW!!! FEE IS \$150.00**  
**After May 1, 2006 Fee will be \$550.00**

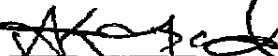
9. Election Campaign Financing  
Trust Fund Contribution, ☐ \$5.00 May Be Added to Fees

10. OFFICERS AND DIRECTORS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	P KAPADIA, NILKANTH 2018 S CHICKASAW TR ORLANDO, FL 32825
TITLE NAME STREET ADDRESS CITY-ST-ZIP	V KAPADIA, ANIL 1537 SHADY OAK DR KISSIMMEE, FL 34744
TITLE NAME STREET ADDRESS CITY-ST-ZIP	S SHAH, DHIMANT 1537 SHADY OAK DR KISSIMMEE, FL 34744
TITLE NAME STREET ADDRESS CITY-ST-ZIP	T SHAH, VISHAKHA 1537 SHADY OAK DR KISSIMMEE, FL 34744
TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	

U000000547360  
05/12/06-80021-021 150.00

**DO NOT WRITE 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:  ANIL KAPADIA 4/26/06 407-709-2281