



**2003 FOR PROFIT CORPORATION
UNIFORM BUSINESS REPORT (UBR)**

DOCUMENT # P0100009140		
1. Entry Name SHREYA CONSTRUCTION, INC.		
Principal Place of Business 2833 NW 91 AVE 205 CORAL SPRINGS, FL 33065		Mailing Address 2833 NW 91 AVE 205 CORAL SPRINGS, FL 33065
2. Principal Place of Business 1933 NW 97 TER.		3. Mailing Address 1933 NW 97 TER.
Subs. Apt. #, etc.		Subs. Apt. #, etc.
City & State CORAL SPRINGS, FL		City & State CORAL SPRINGS, FL
Zip 33071		Zip 33071
Country		Country
4. FEI Number 85-1070614		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 MANJAR, RAJU 6535 W COMMERCIAL BLVD #215 TAMARAC, FL 33318		7. Name and Address of New Registered Agent
Name		Street Address (P.O. Box Number is Not Acceptable)
City		FL Zip Code
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 _____ <small>Signature, typed or printed name of registered agent and file 7 application. NOTE: Registered Agent's signature required when withdrawing.</small>		
9. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/>		\$5.00 May Be Added to Fees
10. OFFICERS AND DIRECTORS		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11
TITLE	NAME TAANK, KAMLESH KUMAR	TITLE
STREET ADDRESS	2833 NW 91 AVE 205	STREET ADDRESS
CITY-ST-ZIP	1933 NW 97 TER. CORAL SPRINGS, FL 33065	CITY-ST-ZIP
	FL 33071	
TITLE	NAME	TITLE
STREET ADDRESS	STREET ADDRESS	STREET ADDRESS
CITY-ST-ZIP	CITY-ST-ZIP	CITY-ST-ZIP
TITLE	NAME	TITLE
STREET ADDRESS	STREET ADDRESS	STREET ADDRESS
CITY-ST-ZIP	CITY-ST-ZIP	CITY-ST-ZIP
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TITLE	NAME	TITLE
STREET ADDRESS	STREET ADDRESS	STREET ADDRESS
CITY-ST-ZIP	CITY-ST-ZIP	CITY-ST-ZIP
12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 110.07(3)(f), 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 507, 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: 		KAMLESH KUMAR TANIK 4/26/03 954-2275227

11029480



CHECK HERE IF MAKING CHANGES ADDRESS CHANGE.

CR2E034 (10/02)