


**2005 FOR PROFIT CORPORATION
ANNUAL REPORT**

FILED
May 06, 2005 08:00 AM
Secretary of State

| | |
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| DOCUMENT # P01000013561 1. Entity Name TWY GROUP INC. |  |
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| Principal Place of Business 16014 N. HWY. 441 EUSTIS, FL 32726 | Mailing Address 16014 N. HWY. 441 EUSTIS, FL 32726 |
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05042005 No Chg-P CR2E034 (10/03)

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|---|--|
| 4. FEI Number 59-3694262 | Applied For <input type="checkbox"/> Not Applicable |
| 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 YADAV, CHANKRAKANT 104 VISTA AVENUE EUSTIS, FL 32726 |
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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 _____ (NOTE: Registered Agent signature required when reinstating) DATE _____

**FILE NOW!!! FEE IS \$150.00
Due by September 7, 2005**

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

In accordance with s. 607.193(2)(b), F.S., the
corporation did not receive the prior notice.

| 10. OFFICERS AND DIRECTORS | |
|--|---|
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | P YADAV, CHANDER 104 VISTA AVE TAVARES, FL 32778 |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | V TYAGI, ASHOK 745 E. ROSEWOOD LANE TAVARES, FL 32778 |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | T WADHAWA, RAMKRISHAN 419 W ROSEWOOD TAVARES, FL 32778 |
| 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 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 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: C. S. YADAV CHANDRAKANT YADAV 05/05/05 (352) 3574120
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #