

2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P01000069553

Entity Name: NAVIN ENTERPRISES, INC.

FILED
May 17, 2007
Secretary of State

Current Principal Place of Business:

1702 SOUTH PINE AVE
OCALA, FL 34474

New Principal Place of Business:

Current Mailing Address:

1702 SOUTH PINE AVE
OCALA, FL 34474

New Mailing Address:

FEI Number: 59-3743613

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

ISLAM, ZUAL M D
3322 SW 39TH ST.
OCALA, FL 34474 US

Name and Address of New Registered Agent:

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.

SIGNATURE:

Electronic Signature of Registered Agent

Date

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

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: PS () Delete
Name: ISLAM, MD ZUAL
Address: 3322 SW 39TH ST.
City-St-Zip: OCALA, FL 34474

Title: S () Delete
Name: NIHALANI, RAKESH
Address: 8107 SW 72ND AVE APT #113 EAST
City-St-Zip: MIAMI, FL 33143

Title: VP () Delete
Name: PATEL, PARESH
Address: 1702 S PINE AVE.
City-St-Zip: OCALA, FL 34474

Title: VP () Delete
Name: GAURAV, TALREJA
Address: 8107 SW 72ND AVE APT #113 EAST
City-St-Zip: MIAMI, FL 33143

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: VP (X) Change () Addition
Name: PORAS, RAJKUMBAR
Address: 2821 NE 3RD ST. APT #35
City-St-Zip: OCALA, FL 34470

I hereby certify that the information supplied with this filing does not qualify for the exemption stated 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 electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: MD ZUAL ISLAM

P

05/17/2007

Electronic Signature of Signing Officer or Director

Date