

# 2007 FOR PROFIT CORPORATION ANNUAL REPORT

**FILED**  
**Apr 23, 2007 8:00 am**  
**Secretary of State**

04-23-2007 90261 034 \*\*\*150.00

**DOCUMENT # P02000033451**

1. Entity Name  
**TAMPA BAY REAL ESTATE SERVICES INC.**



Principal Place of Business  
**5420 BAY CENTER DR.  
116  
TAMPA, FL 33609**

Mailing Address  
**5420 BAY CENTER DR.  
116  
TAMPA, FL 33609**

2. Principal Place of Business - No P.O. Box #

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

04202007

Chg-P

CR2E034 (12/06)

4. FEI Number  
**03-0406212**

Applied For  
Not Applicable

5. Certificate of Status Desired ☐

**\$8.75** Additional  
Fee Required

6. Name and Address of Current Registered Agent

**ADVANI, DEEPAK  
3516 OSPREY COVE DRIVE  
RIVERVIEW, FL 33569**

7. Name and Address of New Registered Agent

Name

**Deepak**

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

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

**FILE NOW!!! FEE IS \$150.00  
After May 1, 2007 Fee will be \$550.00**

9. Election Campaign Financing  
Trust Fund Contribution. ☐

**\$5.00** May Be  
Added to Fees

10. OFFICERS AND DIRECTORS

TITLE PD ☐ Delete  
NAME ADVANI, DEEPAK  
STREET ADDRESS 5541 BAY BLVD., APT 206  
CITY-ST-ZIP PORT RICHEY, FL 34668

TITLE VD ☐ Delete  
NAME CHHABRIA, SHAM K  
STREET ADDRESS 351 OSPREY COVE DR  
CITY-ST-ZIP RIVERVIEW, FL 33569

TITLE D ☐ Delete  
NAME NARSI, VADILAL  
STREET ADDRESS 3514 OSPREY COVE DR  
CITY-ST-ZIP RIVERVIEW, FL 33569

TITLE ☐ Delete  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Delete  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Delete  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE PD ☒ Change ☐ Addition  
NAME Advani, Deepak  
STREET ADDRESS 3516 Osprey Cove drive  
CITY-ST-ZIP Riverview FL 33569

TITLE VD ☒ Change ☐ Addition  
NAME CHHABRIA SHAM K  
STREET ADDRESS 3514 Osprey Cove drive  
CITY-ST-ZIP Riverview, FL 33569.

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

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:**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

**4/20/07**

**813-639-0200**