

2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P02000046064

FILED
Apr 29, 2004
Secretary of State

Entity Name: KHUSHBU, INC.

Current Principal Place of Business:

108 N. MAGNOLIA AVE.
2ND FLOOR, #20020
OCALA, FL 34478 US

New Principal Place of Business:

108 N. MAGNOLIA AVE.
2ND FLOOR, #20020
OCALA, FL 34475 US

Current Mailing Address:

3012 SW 20TH STREET
APP #G-104
OCALA, FL 34474 US

New Mailing Address:

FEI Number: 68-0502537 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

PATEL, SHALESHKUMAR
3012 SW 20TH STREET
APP # G-104
OCALA, FL 34474

Name and Address of New Registered Agent:

PATEL, SHALESHKUMAR N
3012 SW 20TH STREET
APP # G-104
OCALA, FL 34474

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: SHALESHKUMAR N PATEL

04/29/2004

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: D () Delete
Name: PATEL, SHALESHKUMAR
Address: 3012 SW 20TH ST., APP #G-104
City-St-Zip: OCALA, FL 34474

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: PATEL, SHALESHKUMAR N
Address: 3012 SW 20TH ST., APP #G-104
City-St-Zip: OCALA, FL 34474

I hereby certify that the information supplied with this filing does not qualify for the 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 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: SHALESHKUMAR N PATEL

P

04/29/2004

Electronic Signature of Signing Officer or Director

Date