2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P02000063565

Entity Name: DIPTI, INC.

City-St-Zip:

CLINTON, CT 06413

FILED Apr 30, 2009 Secretary of State

Current Principal Place of Business:				New Principal Place of Business:			
12 DAVIS FARM ROAD C/ BHUNESH GANDHI CLINTON, CT 06413				11638 LOIS JERRY RD MANAN GANDHI JACKSONVILLE, FL 32258			
Current Mailing Address:				New Mailing Address:			
12 DAVIS FARM ROAD C/ BHUNESH GANDHI CLINTON, CT 06413				4256 ELDRIDGE LOOP ORANGE PARK, FL 32073			
FEI Number:	30-0086506	FEI Number Applied For ()	FEI Nun	nber Not Appl	icable ()	Certificate of Status De	esired()
Name and Address of Current Registered Agent:				Name and Address of New Registered Agent:			
GHANDI, MANAN 669 EAGLE VIEW CIRCLE TALLAHASSEE, FL 32311 US				GHANDI, MANAN 11638 LOIS JERRY RD JACKSONVILLE, FL 32258 US			
The above in the State		submits this statement for the	purpose o	f changing i	ts registered	office or registered ag	ent, or both,
SIGNATURE:				04/30/2009			
Electronic Signature of Registered Agent				Date			
Election Can	npaign Financing	Trust Fund Contribution ().					
OFFICERS AND DIRECTORS:				ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:			
Title: Name: Address: City-St-Zip:	PSD () GANDHI, MANA 669 EAGLE VIE TALLAHASSEE	W CIRCLE		Title: Name: Address: City-St-Zip:	GANDHI, MAN 11638 LOIS		
Title: Name: Address: City-St-Zip:	TD () Delete GANDHI, DIPTI 12 DAVIS ROAD D: CLINTON, CT 06413			Title: Name: Address: City-St-Zip:	()Change()Addition		
Title: Name: Address:	D () GANDHI, BHUN 12 DAVIS ROAI			Title: Name: Address:	(() Change () Addition	

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.

City-St-Zip:

SIGNATURE: MANAN GANDHI P 04/30/2009