


**2005 FOR PROFIT CORPORATION
ANNUAL REPORT**

FILED
Mar 15, 2005 08:00 AM
Secretary of State

DOCUMENT # P02000073480 1. Entity Name SHAIVAL REALTY, INC.	
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Principal Place of Business C/O CREATIVE CHOICE HOMES 4243-D NORTHLAKE BLVD. PALM BEACH GARDENS, FL 33410	Mailing Address C/O CREATIVE CHOICE HOMES 4243-D NORTHLAKE BLVD. PALM BEACH GARDENS, FL 33410
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DO NOT WRITE IN THIS SPACE



02172005 No Chg-P CR2E034 (10/03)

4. FEI Number 06-1643902	Applied For <input type="checkbox"/> Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

KAKKAR, YASH PAL
4243-D NORTHLAKE BLVD
PALM BCH GARDENS, FL 33410

**DO NOT WRITE
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)
Signature, typed or printed name of registered agent and title if applicable

DATE: _____

FILE NOW!!! FEE IS \$150.00 After May 1, 2005 Fee will be \$550.00	9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees
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10. OFFICERS AND DIRECTORS

TITLE NAME STREET ADDRESS CITY-ST-ZIP	S KAKKAR, YASH PAL 4243-D NORTHLAKE BLVD PALM BCH GARDENS, FL 33410
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD PATEL, PARVIN 4243-D NORTHLAKE BLVD. PALM BEACH GARDENS, FL 33410
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03/16/05-80002-001 158.75

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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)(f), 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 any address, with all other like empowered

SIGNATURE: 
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

3-14-05 561-627-7988
Date Daytime Phone #

Yash Pal Kakkar, Sec.