## FILED Jul 26, 2004 08:00 AM Secretary of State

## 2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT # P02000091702  1. Entity Name SHRINATHJI INC OF TAMPA							
Principal Plac 12320 4 0A TAMPA, FL	KS RD.	Mailing Address 12924 VICKSBURG DR. TAMPA, FL. 33625					
				07232004	No Chg-P	CR2E034 (10/	03)
, D	O NOT WRITE	IN THIS SPA	<b>E</b>	4. FEI Numbe 06-164		-	Applied For Not Applicable
1 2	6. Name and Address of Current Pe	gistered Agent	લાવોનામાં જોઈએ જે જો કું જે જે જોઈ છે છે.	<u> </u>	of Status Desired	Fee Re	Additional pulred
	YKRISHNA KSBURG DRIVE			DO	NOT WI	RITE	
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, hybrid or printed name of registered agent and title if applicable. (NOTE Registered Agent signature required when resistating)  DATE							
FILE NOWILL FEE IS \$150,00  Pue by September 8, 2004  Figure 1, pad or prised name of registered agent and bits of applicable. (NOTE Registered  Pue by September 8, 2004			cing _ <b>\$5.</b>	.00 May Be ed to Fees In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.			
10. Title	OFFIÇERS AND DI	RECTORS			0000 107/26/0	00168380	
NAME STREET ADDRESS CITY-SI-ZIP	PATEL, JAYKRISHNA 12924 VICKSBURG DRIVE TAMPA, FL 33625			A Common		4-90011-0	11 150.00
TITLE HAME STREET ADDRESS CITY - ST - ZIP	VP PATEL, SMITABEN J 12924 VICKSBURG DRIVE TAMPA, FL 33625						
TITLE NAME STREET ADDRESS CITY-ST-ZIF					NOT W		
TITLE HAME STREET ADDRESS CITY-ST-ZIP				IN.	THIS SP	ACE	
TITLE NAME STREET ADDRESS CITY-ST-ZIP			The second of th		THIS SP.		
TITLE NAME STREET ADDRESS CITY- ST- ZIP			. C. 25				
12. I hereby certify that the information supplied with this filling does not quality for the exemption stated in Section 119.07(3)(f). Florida Statutes, I further certify that the information indicated on this report or suppliemental 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.							

VICEPICSTOCK

SIGNATURE: