## 2008 FOR PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# P03000018608

Address:

City-St-Zip:

727 S FEDERAL HWY

LAKE WORTH, FL 33460

FILED Apr 29, 2008 Secretary of State

Entity Nar	me: TULSIKR	RUPA OF	PALM BEACH INC.				
Current Principal Place of Business:				New Principal Plac	New Principal Place of Business:		
	DERAL HWY RTH, FL 3346	0 US					
Current Mailing Address:				New Mailing Addre	New Mailing Address:		
	ERAL HWY RTH, FL 3346	0 US					
FEI Number:	36-4524419	FEI Num	ber Applied For()	FEI Number Not Applicable ( )	Certificate of Status Desired ( )		
Name and Address of Current Registered Agent:				Name and Address	Name and Address of New Registered Agent:		
PATEL, ANAND 1503 BELVEDERE ROAD WEST PALM BEACH, FL 33406 US					PATEL, ANAND 727 S FEDERAL HWY LAKE WORTH, FL 33460 US		
	named entity s e of Florida.	submits th	is statement for the p	ourpose of changing its registe	red office or registered agent, or both,		
SIGNATURE: DHARMENDRA R PATEL					04/29/2008		
	Electron	ic Signatu	re of Registered Age	ent	Date		
Election Car	npaign Financing	g Trust Fun	d Contribution ( ).				
OFFICERS AND DIRECTORS:				ADDITIONS/CHAN	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:		
Title: Name: Address: City-St-Zip:	D () PATEL, ANAND 1503 BELVEDE WEST PALM BI		3406	Title: Name: Address: City-St-Zip:	( ) Change ( ) Addition		
Title: Name: Address: City-St-Zip:	D () PATEL, DHARN 727 S FEDERA LAKE WORTH,	L HWY		Title: Name: Address: City-St-Zip:	( ) Change ( ) Addition		
Title: Name:	D () PATEL. SWATI	Delete D		Title: Name:	( ) 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.

Address:

City-St-Zip:

SIGNATURE: DHARMENDRA R PATEL 04/29/2008 DIRE