


2005 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Mar 17, 2005 08:00 AM
Secretary of State

DOCUMENT # P03000030985
 1. Entity Name
 ESHA HOSPITALITY, INC.



Principal Place of Business Mailing Address
 LOT 45 LOLOLDLY CT. 3816 MEDFORD DRIVE EAST
 PENSACOLA, FL 32526 US MOBILE, AL 36693 US

DO NOT WRITE IN THIS SPACE



02212005 No Chg-P CR2E034 (10/03)

4. FEI Number Applied For
 41-2091838 Not Applicable

5. Certificate of Status Desired \$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent
 GILLIAM, THOMAS J JR.
 226 PALAFOX PLACE
 NINTH FLOOR, SEVILLE TOWER
 PENSACOLA, FL 32501

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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: *Raj Patel* DATE: 3/8/05
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

FILE NOW!!! FEE IS \$150.00
After May 1, 2005 Fee will be \$550.00

9. Election Campaign Financing Trust Fund Contribution. \$5.00 May Be Added to Fees

10. OFFICERS AND DIRECTORS

TITLE	P
NAME	DESAI, RAJENDRA
STREET ADDRESS	3816 MEDFORD DRIVE E.
CITY-ST-ZIP	MOBILE, AL 36693
TITLE	V
NAME	DESAI, ASHVIN
STREET ADDRESS	29450 N. MAIN ST.
CITY-ST-ZIP	DAPHNE, AL 36526
TITLE	S
NAME	PATEL, RAJIV
STREET ADDRESS	3816 MEDFORD DRIVE E.
CITY-ST-ZIP	MOBILE, AL 36693
TITLE	T
NAME	PATEL, ANIL
STREET ADDRESS	4389 S. ALABAMA AVE.
CITY-ST-ZIP	MONROEVILLE, AL 36460
TITLE	SHMR
NAME	PATEL, BHARAT B
STREET ADDRESS	P.O. BOX 1994
CITY-ST-ZIP	LAUREL, MS 39441
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

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UD0000367449
 03/17/05-80071-005 150.00
 03/17/05-80071-006 8.75

12. I hereby certify that the information supplied with this filing does not qualify 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 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.

SIGNATURE: *Raj Patel* DATE: 3/8/05 DAYTIME PHONE #: 850-259-8142
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #