

2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P03000040817

FILED
Apr 19, 2004
Secretary of State

Entity Name: RIYA HOSPITALITY INC.

Current Principal Place of Business:

P. O. BOX: 37006
JACKSONVILLE, FL 32236 US

New Principal Place of Business:

P. O. BOX: 551550
JACKSONVILLE, FL 32255 US

Current Mailing Address:

P. O. BOX: 37006
JACKSONVILLE, FL 32236 US

New Mailing Address:

P. O. BOX: 551550
JACKSONVILLE, FL 32255 US

FEI Number: 27-0060098

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

PATEL, MUKENDRA
8787 SOUTHSIDE BLVD.
APT.: 4101
JACKSONVILLE, FL 32256 US

Name and Address of New Registered Agent:

PATEL, MUKENDRA
4940 MUSTANG ROAD
APT.: 400
JACKSONVILLE, FL 32216 US

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.

SIGNATURE: MUKENDRA PATEL

04/19/2004

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: PATEL, MUKENDRA
Address: P. O. BOX: 37006
City-St-Zip: JACKSONVILLE, FL 32236 US

Title: VP () Delete
Name: PATEL, PARIMAL
Address: P. O. BOX: 37006
City-St-Zip: JACKSONVILLE, FL 32236 US

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: PATEL, MUKENDRA
Address: 4940 MUSTANG ROAD, APT.: 400
City-St-Zip: JACKSONVILLE, FL 32216 US

Title: VP (X) Change () Addition
Name: PATEL, PARIMAL
Address: 8550 GLENBURY CT., N
City-St-Zip: JACKSONVILLE, FL 32256 US

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

SIGNATURE: MUKENDRA PATEL

P

04/19/2004

Electronic Signature of Signing Officer or Director

Date