

# 2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P03000042693

FILED  
Apr 29, 2009  
Secretary of State

Entity Name: LAXMI-PATEL ENTERPRISES, INC.

## Current Principal Place of Business:

3941 TAMIAMI TRL  
#3169  
PUNTA GORDA, FL 33950

## New Principal Place of Business:

## Current Mailing Address:

3941 TAMIAMI TR  
3169  
PUNTA GORDA, FL 33950

## New Mailing Address:

FEI Number: 42-1857305

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

MCLEOD, RODERICK D  
2419 EAST MALL DR  
FT MYERS, FL 33901 US

## Name and Address of New Registered Agent:

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:

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: D ( ) Delete  
Name: PATEL, HARISHKUMER  
Address: 3941 TAMIAMI TRL #3169  
City-St-Zip: PUNTA GORDA, FL 33950

Title: D ( ) Delete  
Name: PATEL, CHETAN  
Address: 3941 TAMIAMI TRL #3169  
City-St-Zip: PUNTA GORDA, FL 33950

Title: D ( ) Delete  
Name: PATEL, JYOTI  
Address: 3941 TAMIAMI TRL #3169  
City-St-Zip: PUNTA GORDA, FL 33950

Title: D ( ) Delete  
Name: PATEL, SHILA  
Address: 3941 TAMIAMI TRL #3169  
City-St-Zip: PUNTA GORDA, FL 33950

Title: D ( ) Delete  
Name: PATEL, SHEETAL  
Address: 3941 TAMIAMI TRL #3169  
City-St-Zip: PUNTA GORDA, FL 33950

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

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.

SIGNATURE: CHETAN PATEL

D

04/29/2009

Electronic Signature of Signing Officer or Director

Date