2006 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 30, 2006
Secretary of State

DOCUMENT# P03000050737

Entity Name: SHRI GOYAM INC.

Current Principal Place of Business:

698 N.FERDON BLVD
CRESTVIEW, FL 32536

New Principal Place of Business:

P.O.BOX 9696
PANAMA CITY BEACH, FL 32417

Current Mailing Address:

P.O.BOX 9696
PANAMA CITY BEACH, FL 32417

New Mailing Address:

FEI Number: 35-2201790 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

SHAH, PRASHANT R
P.O.BOX 9696
PANAMA CITY BEACH, FL 32417 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: PD ( ) Delete
Name: SHAH, RAJENDRA&NIRMA C
Address: 109 GRAND HERON DRIVE
City-St-Zip: PANAMA CITY BEACH, FL 32407

Title: VD ( ) Delete
Name: CONTRACTOR, NITAL
Address: 4651 HWY 20
City-St-Zip: NICEVILLE, FL 32578

Title: SD ( ) Delete
Name: SHAH, PRASHANT R
Address: 109 GRAND HERON
City-St-Zip: PANAMA CITY, FL 32407

Title: TD (X) Delete
Name: SHAH, MANISH C
Address: 109 GRAND HERON DRIVE
City-St-Zip: PANAMA CITY BEACH, FL 32407

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change ( ) Addition
Name: SHAH, RAJENDRA&NIRMA C
Address: P.O. BOX 9696
City-St-Zip: PANAMA CITY BEACH, FL 32417

Title: TD (X) Change ( ) Addition
Name: CONTRACTOR, NITAL
Address: 4651 HWY 20
City-St-Zip: NICEVILLE, FL 32578

Title: VD (X) Change ( ) Addition
Name: SHAH, PRASHANT R
Address: P.O. BOX 9696
City-St-Zip: PANAMA CITY, FL 32417

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

I hereby certify that the information supplied with this filing does not qualify for the 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: PS VD 04/30/2006

Electronic Signature of Signing Officer or Director Date