2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P03000050737

Entity Name: SHRI GOYAM INC.

FILED Jul 24, 2007 Secretary of State

Current Principa	al Place of Business:	New Principal Place of Business:

P.O.BOX 9696 8015 FRONT BEACH ROAD

PANAMA CITY BEACH, FL 32417 PANAMA CITY BEACH, FL 32407

Current Mailing Address: New Mailing Address:

P.O.BOX 9696 8015 FRONT BEACH ROAD PANAMA CITY BEACH, FL 32417 PANAMA CITY BEACH, FL 32407

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

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

SHAH, PRASHANT R
P.O.BOX 9696
SHAH, PRASHANT R
109 GRAND HERON DRIVE

P.O.BOX 9696 109 GRAND HERON DRIVE PANAMA CITY BEACH, FL 32417 US PANAMA CITY BEACH, FL 32407 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: P.R.SHAH 07/24/2007

Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

 Title:
 PD
 () Delete
 Title:
 PD
 (X) Change () Addition

 Name:
 SHAH, RAJENDRA&NIRMA C
 Name:
 SHAH, RAJENDRA&NIRMA C

 Address:
 P.O. BOX 9696
 Address:
 109 GRAND HERON DRIVE

City-St-Zip: PANAMA CITY BEACH, FL 32417 City-St-Zip: PANAMA CITY BEACH, FL 32407

 Title:
 TD () Delete
 Title:
 () Change () Addition

 Name:
 CONTRACTOR, NITAL
 Name:

 Address:
 4651 HWY 20
 Address:

 City-St-Zip:
 NICEVILLE, FL 32578
 City-St-Zip:

Title: VD () Delete Title: VD (X) Change () Addition

Name: SHAH, PRASHANT R
Address: P.O. BOX 9696
City-St-Zip: PANAMA CITY, FL 32417

Name: SHAH, PRASHANT R
Address: 109 GRAND HERON DRIVE
City-St-Zip: PANAMA CITY, FL 32417

City-St-Zip: PANAMA CITY BEACH, FL 32407

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: P.R.SHAH VD 07/24/2007