

2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P03000054294

FILED
Apr 22, 2004
Secretary of State

Entity Name: SHIVAM INVESTMENTS, INC.

Current Principal Place of Business:

1024 S WASHINGTON AVE
TITUSVILLE, FL 32708

New Principal Place of Business:

1024 S WASHINGTON AVE
TITUSVILLE, FL 32780

Current Mailing Address:

1024 S WASHINGTON AVE
TITUSVILLE, FL 32708

New Mailing Address:

1024 S WASHINGTON AVE
TITUSVILLE, FL 32780

FEI Number: 43-2014880

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

PATEL, KIRAN
1024 S WASHINGTON AVE
TITUSVILLE, FL 32708

Name and Address of New Registered Agent:

PATEL, KIRANKUMAR C
1024 S WASHINGTON AVE
TITUSVILLE, FL 32780

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: KCP

04/22/2004

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: DPS () Delete
Name: PATEL, KIRAN
Address: 1024 S WASHINGTON AVE
City-St-Zip: TITUSVILLE, FL 32708

Title: DVT () Delete
Name: PATEL, DHARMISTA K
Address: 1024 S WASHINGTON AVE
City-St-Zip: TITUSVILLE, FL 32708

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: DPS (X) Change () Addition
Name: PATEL, KIRANKUMAR C
Address: 1024 S WASHINGTON AVE
City-St-Zip: TITUSVILLE, FL 32780

Title: DVT (X) Change () Addition
Name: PATEL, DHARMISTA K
Address: 1024 S WASHINGTON AVE
City-St-Zip: TITUSVILLE, FL 32780

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: KCP

DPS

04/22/2004

Electronic Signature of Signing Officer or Director

Date