

2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P04000040301

Entity Name: AMBIKA ASSOCIATES INC

FILED
Feb 11, 2005
Secretary of State

Current Principal Place of Business:

2420 W CARROL PLACE
TAMPA, FL 33612

New Principal Place of Business:

7015 N. HIMES AVE
TAMPA, FL 33614

Current Mailing Address:

2420 W CARROL PLACE
TAMPA, FL 33612

New Mailing Address:

7015 N. HIMES AVE
TAMPA, FL 33614

FEI Number: 20-0822371

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

RELIANCE CONSULTING LLC
3105 W WATERS AVENUE
SUITE 105
TAMPA, FL 33614 US

Name and Address of New Registered Agent:

CHOKSHI, SANDIP G
8115 COLONIAL VILLAGE DRIVE
104
TAMPA, FL 33625 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: SANDIP G CHOKSHI

02/11/2005

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: PD () Delete
Name: CHOKSI, SUMAN
Address: 2420 W CARROL PLACE
City-St-Zip: TAMPA, FL 33612

Title: VSTD () Delete
Name: CHOKSI, SHAILA
Address: 2420 W CARROL PLACE
City-St-Zip: TAMPA, FL 33612

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change () Addition
Name: CHOKSI, SUMAN
Address: 8639 N. HIMES AVE, APT#2615
City-St-Zip: TAMPA, FL 33614

Title: VSTD (X) Change () Addition
Name: CHOKSHI, SANDIP G
Address: 8115 COLONIAL VILLAGE DRIVE
City-St-Zip: TAMPA, FL 33625

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: SANDIP G CHOKSHI

VSTD

02/11/2005

Electronic Signature of Signing Officer or Director

Date