

2007 FOR PROFIT CORPORATION AMENDED ANNUAL REPORT

DOCUMENT # P04000068754

1. Entity Name
SWAMI BAPA'S KRUPA INC.



Principal Place of Business
5448 TREIG LANE
WESLEY CHAPEL, FL 33544

Mailing Address
5448 TREIG LANE
WESLEY CHAPEL, FL 33544

2. Principal Place of Business - No P.O. Box #

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

07122007

Chg-P

CR2E034 (12/06)

4. FEI Number

04-3790037

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

PATEL, CHIRAGKUMAR
5448 TREIG LANE
WESLEY CHAPEL, FL 33544

7. Name and Address of New Registered Agent

Name

Street Address (P.O. Box Number is Not Acceptable)

City

FL

Zip Code

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

Amended AR is \$61.25

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

10. OFFICERS AND DIRECTORS

TITLE PD
NAME PATEL, VAIBHAVI ☐ Delete
STREET ADDRESS 5448 TREIG LANE
CITY-ST-ZIP WESLEY CHAPEL, FL 33544

TITLE S
NAME PATEL, CHIRAGKUMAR ☐ Delete
STREET ADDRESS 5448 TREIG LANE
CITY-ST-ZIP WESLEY CHAPEL, FL 33544

TITLE T
NAME PATEL, KEVALKUMAR ☐ Delete
STREET ADDRESS 5448 TREIG LANE
CITY-ST-ZIP WESLEY CHAPEL, FL 33544

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE ☒ Change ☐ Addition
NAME **D**
STREET ADDRESS **700107079697**
CITY-ST-ZIP **08/01/07--01040--009 **61.25**

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☒ Addition
NAME **D P**
STREET ADDRESS **NARESHKUMAR N. PATEL**
CITY-ST-ZIP **5448 TREIG LANE**
WESLEY CHAPEL, FL 33544

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

SECRETARY

Date

Daytime Phone #

7/16/07

813-390-7766

FILED

07 JUL 25 PM 1:17

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

