## 2006 FOR PROFIT CORPORATION

## Apr 24, 2006 8:00 am Secretary of State ANNUAL REPORT 04-24-2006 90343 009 \*\*\*150.00 DOCUMENT # P04000116265 SHAH PROPERTIES, INC. Principal Place of Business Mailing Address 60028842 161 W CHASE STREET 161 W CHASE STREET HERNANDO, FL 34442 HERNANDO, FL 34442 04192006 No Chg-P CR2E034 (11/05) DO NOT WRITE IN THIS SPACE Applied For 4. FEI Number 20-1481027 Not Applicable \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent SHAH. SANJI DO NOT WRITE 161 W CHASE STREET HERNANDO, FL 34442 IN THIS SPACE 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 9. Election Campaign Financing \$5.00 May Be FILE NOW!!! FEE IS \$150.00 After May 1, 2006 Fee will be \$550.00 Trust Fund Contribution. Added to Fees OFFICERS AND DIRECTORS 10. TITLE DPT SHAH, SANJIV I NAME STREET ADDRESS 161 W CHASE STREET HERNANDO, FL 34442 CITY-ST-ZIP DS TITLE SHAH, GIRA 161 W CHASE STREET STREET ADDRESS HERNANDO, FL 34442 CITY-ST-ZIP NAME STREET ADDRESS DO NOT WRITE CITY-ST-ZIP IN THIS SPACE TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE 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 truetee-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 attactment with an address, with all other like empowered.

SIGNATURE:

TITLE NAME STREET ADDRESS CITY-ST-ZIP

NO TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

**FILED**