## 2006 FOR PROFIT CORPORATION REINSTATEMENT

## DOCUMENT# P04000155807

City-St-Zip:

WESTON, FL 33326 US

FILED Oct 20, 2006 Secretary of State

Entity Name: DARVESHING **Current Principal Place of Business: New Principal Place of Business:** 626 VILLAGE LAKE DR WESTON, FL 33326 **Current Mailing Address: New Mailing Address:** 626 VILLAGE LAKE DR WESTON, FL 33326 FEI Number: FEI Number Applied For ( ) FEI Number Not Applicable (X) Certificate of Status Desired ( ) Name and Address of Current Registered Agent: Name and Address of New Registered Agent: OVIES, IDA C COOMBS, BARRINGTON G 3500 N STATE ROAD 7 2307 DOUGLAS RD 400 SUITE 464 MIAMI, FL 33145 US LAUDERDALE LAKES, FL 33319 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: BCOOMBS 10/20/2006 Electronic Signature of Registered Agent Date In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice. Election Campaign Financing Trust Fund Contribution ( ). **OFFICERS AND DIRECTORS:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: Title: PS () Delete () Change () Addition GURNANI, SATYA Name: Name: 626 VILLAGE LAKE DR Address: Address: City-St-Zip: WESTON, FL 33326 US City-St-Zip: ( ) Delete Title: Title: () Change () Addition Name: GWALANI, KAMAL Name: 626 VILLAGE LAKE DR Address: Address: WESTON, FL 33326 US City-St-Zip: City-St-Zip: Title: Title: ( ) Delete () Change () Addition LALWANI, DEVKRISHIN Name: Name: 626 VILLAGE LAKE DR Address: Address:

I hereby certify that the information supplied with this filing does not qualify for the 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.

City-St-Zip:

SIGNATURE: SGURNANI PD 10/20/2006