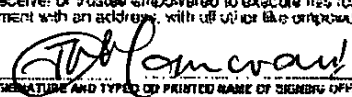


**2006 FOR PROFIT CORPORATION
ANNUAL REPORT****FILED**
Jul 13, 2006 8:00 am
Secretary of State

07-13-2006 90021 047 ***150.00

DOCUMENT # P05000011646			
1. Entity Name DARVESH PLAZA, INC.			
Principal Place of Business 134 PINEHURST DRIVE NEW ORLEANS, LA 70131		Mailing Address 134 PINEHURST DRIVE NEW ORLEANS, LA 70131	
2. Principal Place of Business		3. Mailing Address	
Suite, Apt. #, etc.		Suite, Apt. #, etc.	
City & State		City & State	
Zip	Country	Zip	Country
4. FEI Number 68-0602987		Applied For Not Applicable	
5. Certificate of Status Desired ☐		\$8.75 Additional Fee Required	
6. Name and Address of Current Registered Agent DODANI, ARJAN 2521 N. HALIFAX AVENUE DAYTONA BEACH, FL 32118		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 hereby withdrawing the obligations of registered agent.			
SIGNATURE _____ Signature must be in ink and must be legible and not a photocopy. (NOTE: Registered Agent signature required when not changed)			
FILE NOW!!! FEE IS \$150.00 Due by September 6, 2006		9. Election Campaign Financing Total Fund Contribution ☐ \$5.00 May Be Added to Fees	
		In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.	
10. OFFICERS AND DIRECTORS		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE	PRESIDENT ☐ Delete	TITLE	☐ Change ☐ Addition
NAME	JIVAN V. MANIVANI	NAME	
STREET ADDRESS	134 PINEHURST DR.	STREET ADDRESS	
CITY - ST - ZIP	NEW ORLEANS, LA 70131	CITY - ST - ZIP	
TITLE	OFFICER ☐ Delete	TITLE	☐ Change ☐ Addition
NAME	PREM J. MANIVANI	NAME	
STREET ADDRESS	134 PINEHURST DR.	STREET ADDRESS	
CITY - ST - ZIP	NEW ORLEANS, LA 70131	CITY - ST - ZIP	
TITLE	☐ Delete	TITLE	☐ Change ☐ Addition
NAME		NAME	
STREET ADDRESS		STREET ADDRESS	
CITY - ST - ZIP		CITY - ST - ZIP	
TITLE	☐ Delete	TITLE	☐ Change ☐ Addition
NAME		NAME	
STREET ADDRESS		STREET ADDRESS	
CITY - ST - ZIP		CITY - ST - ZIP	
TITLE	☐ Delete	TITLE	☐ Change ☐ Addition
NAME		NAME	
STREET ADDRESS		STREET ADDRESS	
CITY - ST - ZIP		CITY - ST - ZIP	
12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 110, Florida Statutes. I further certify that the information contained on this report or any amendment 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 prior file amendments.			
SIGNATURE: 		7/10/06	
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR			
JIVAN V. MANIVANI,			