

**2008 FOR PROFIT CORPORATION
ANNUAL REPORT**

DOCUMENT # P05000013055

1. Entity Name
NARI DURGA INC



Principal Place of Business
1870 TAMAMI TRL N.
FC9
NAPLES, FL 34102

Mailing Address
1870 TAMAMI TRL N.
FC9
NAPLES, FL 34102

**FILED
Jan 24, 2008 08:00 AT
Secretary of State**



01152008 No Chg-P CR2E034 (11/05)

4. FEI Number 56-2498676	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required	

DO NOT WRITE IN THIS SPACE

6. Name and Address of Current Registered Agent

PATEL, AJAY
1870 TAMAMI TRL N.
FC9
NAPLES, FL 34102

**DO NOT WRITE
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)

1/8/08

DATE

**FILE NOW!!! FEE IS \$150.00
After May 1, 2008 Fee will be \$550.00**

9. Election Campaign Financing
Trust Fund Contribution.



**\$5.00 May Be
Added to Fees**

000000793198
01/24/08-80040-004 150.00

10. OFFICERS AND DIRECTORS

TITLE P.
NAME PATEL, AJAY R
STREET ADDRESS 1870 TAMAMI TRL N.
CITY-ST-ZIP NAPLES, FL 34102

TITLE D
NAME RAO, RANIPATH M
STREET ADDRESS 850 105TH AVE. N.
CITY-ST-ZIP NAPLES, FL 34108

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

**DO NOT WRITE
IN THIS SPACE**

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, trustee, or 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:

1/8/08

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #