


2008 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Jan 24, 2008 08:00 AM
Secretary of State

| | |
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| DOCUMENT # P05000013055 |  |
| 1. Entity Name NARI DURGA INC | |

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|---|---|
| Principal Place of Business 1870 TAMiami TrL N. # FC9 NAPLES, FL 34102 | Mailing Address 1870 TAMiami TrL N. # FC9 NAPLES, FL 34102 |
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01152008 No Chg-P CR2E034 (11/05)

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| 4. FEI Number 56-2498676 | Applied For Not Applicable |
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| 5. Certificate of Status Desired <input type="checkbox"/> | \$8.75 Additional Fee Required |
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| 6. Name and Address of Current Registered Agent PATEL, AJAY 1870 TAMiami TrL N. FC9 NAPLES, FL 34102 |
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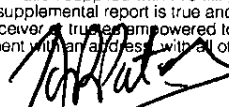
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| 8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent. | |
| SIGNATURE:  | DATE: 1/8/08 |
| <small>Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating)</small> | |

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| FILE NOW!!! FEE IS \$150.00 After May 1, 2008 Fee will be \$550.00 | 9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees | U000000793198 01/24/08-80040-004 150.00 |
|---|---|--|

| 10. OFFICERS AND DIRECTORS | |
|--|--|
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | P. PATEL, AJAY R 1870 TAMiami TrL N. NAPLES, FL 34102 |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | D RAO, RANIPATH M 850 105TH AVE. N. NAPLES, FL 34108 |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | |
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| 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:  | DATE: 1/8/08 |
| <small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR</small> | |