

# **2012 FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P05000076257

Entity Name: SPICE BAZAAR, INC.

**FILED**  
**Feb 10, 2012**  
**Secretary of State**

**Current Principal Place of Business:**

2936 N CYPRESS PT  
WADSWORTH, IL 60083

**New Principal Place of Business:**

**Current Mailing Address:**

2936 N CYPRESS PT  
WADSWORTH, IL 60083

**New Mailing Address:**

FEI Number: 20-3011004

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

**Name and Address of Current Registered Agent:**

VAKHARIA, BHUPEN  
7797 N UNIVERSITY DR STE 205  
TAMARAC, FL 33321 US

**Name and Address of New Registered Agent:**

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: \_\_\_\_\_

Electronic Signature of Registered Agent

\_\_\_\_\_  
Date

**OFFICERS AND DIRECTORS:**

Title: D  
Name: TRIKHA, MIKI  
Address: 2936 N CYPRESS PT  
City-St-Zip: WADSWORTH, IL 60083

Title: D  
Name: TRIKHA, NIDHI  
Address: 2936 N CYPRESS PT  
City-St-Zip: WADSWORTH, IL 60083

I hereby 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 all other like empowered.

SIGNATURE: MIKI TRIKHA

D

02/10/2012

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date