

# 2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P05000103651

FILED  
Jul 21, 2006  
Secretary of State

Entity Name: JAI AMBIKA ENTERPRISE, INC.

## Current Principal Place of Business:

19310 SANDY SPRINGS CIR.  
LUTZ, FL 33558

## New Principal Place of Business:

35855 HWY 27 NORTH  
HAINES CITY, FL 33844

## Current Mailing Address:

19310 SANDY SPRINGS CIR.  
LUTZ, FL 33558

## New Mailing Address:

35855 HWY 27 NORTH  
HAINES CITY, FL 33844

FEI Number: 20-5237337

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

PATEL, MUKESHKUMAR  
19310 SANDY SPRINGS CIR.  
LUTZ, FL 33558 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

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:

Title: D ( ) Delete  
Name: PATEL, MUKESHKUMAR  
Address: 19310 SANDY SPRINGS CIR.  
City-St-Zip: LUTZ, FL 33558

Title: D ( ) Delete  
Name: PATEL, GIRA  
Address: 19310 SANDY SPRINGS CIR.  
City-St-Zip: LUTZ, FL 33558

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change ( ) Addition  
Name: PATEL, MUKESHKUMAR  
Address: 19310 SANDY SPRINGS CIR.  
City-St-Zip: LUTZ, FL 33558

Title: VP (X) Change ( ) Addition  
Name: PATEL, GIRA  
Address: 19310 SANDY SPRINGS CIR.  
City-St-Zip: LUTZ, FL 33558

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.

SIGNATURE: GIRA PATEL

VP

07/21/2006

Electronic Signature of Signing Officer or Director

Date