

2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P05000120618

Entity Name: AUM SAI BABA INC.

FILED
Apr 25, 2008
Secretary of State

Current Principal Place of Business:

85 RIVER PARK DRIVE
MIDWAY, FL 32343

New Principal Place of Business:

8201 NATURE COVE WAY
TAMPA, FL 33647

Current Mailing Address:

8201 NATURE COVE WAY
TAMPA, FL 33647

New Mailing Address:

FEI Number: 25-1925204

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

PATEL, MOHAN
8201 NATURE COVE WAY
TAMPA, FL 33647 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

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: PTSD () Delete
Name: PATEL, MOHAN
Address: 8201 NATURE COVE WAY
City-St-Zip: TAMPA, FL 33647

Title: D () Delete
Name: PATEL, USHA
Address: 8201 NATURE COVE WAY
City-St-Zip: TAMPA, FL 33647

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify 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: MOHAN PATEL

PTSD

04/25/2008

Electronic Signature of Signing Officer or Director

Date