


# 2006 FOR PROFIT CORPORATION ANNUAL REPORT

**FILED**  
**Sep 01, 2006 8:00 am**  
**Secretary of State**

09-01-2006 90004 001 \*\*\*\*\*8.75  
09-01-2006 90004 002 \*\*\*150.00

<b>DOCUMENT # P05000121154</b>	
1. Entity Name <b>SUKHI, INC.</b>	

Principal Place of Business <b>15528 CATHERINE CIRCLE GROVELAND, FL 34736</b>	Mailing Address <b>15528 CATHERINE CIRCLE GROVELAND, FL 34736</b>
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**66023711**



2. Principal Place of Business <b>414 Eagle Ridge Drive</b> Suite, Apt. #, etc.	3. Mailing Address <b>414 Eagle Ridge Drive</b> Suite, Apt. #, etc.
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08162006 Chg-P CR2E034 (11/05)

City & State <b>Lake Wales, FL</b>	City & State <b>Lake Wales, FL</b>
Zip <b>33853</b>	Zip <b>33853</b>
Country <b>Polk</b>	Country <b>Polk</b>

4. FEI Number <b>65-1262319</b>	Applied For <input type="checkbox"/> Not Applicable
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5. Certificate of Status Desired <input checked="" type="checkbox"/> <b>\$8.75 Additional Fee Required</b>
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6. Name and Address of Current Registered Agent <b>PATEL, SUREKHA P 15528 CATHERINE CIRCLE GROVELAND, FL 34736</b>	
7. Name and Address of New Registered Agent Name <b>Patel, Rajendra K</b> Street Address (P.O. Box Number is Not Acceptable) <b>7351 Bent Grass Dr</b> City <b>Winter Haven</b> FL Zip Code <b>33884</b>	

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 <b>S.R. Patel</b> Signature: typed or printed name of registered agent and title if applicable.	<b>surekha Patel</b> (NOTE: Registered Agent signature required when reinstating)
DATE <b>8/26/06</b>	

<b>FILE NOW!!! - FEE IS \$150.00 Due by September 6, 2006</b>	9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> <b>\$5.00</b> May Be Added to Fees	In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.
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10. OFFICERS AND DIRECTORS		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	PD PATEL, SUREKHA P 15528 CATHERINE CIRCLE GROVELAND, FL 34736 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY - ST - ZIP	<b>surekha Patel</b> 7351 Bent Grass Dr Winter Haven, FL 33884 <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY - ST - ZIP	TD PATEL, RAJENDRA K 15528 CATHERINE CIRCLE RIVERVIEW, FL 33511 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY - ST - ZIP	<b>Patel, Rajendra</b> 7351 Bent Grass Dr Winter Haven, FL 33884 <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY - ST - ZIP	SD PATEL, BHUPENDRA 231 RUBY LAKE LANE WINTER HAVEN, FL 33884 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY - ST - ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY - ST - ZIP	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY - ST - ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY - ST - ZIP	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY - ST - ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY - ST - ZIP	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY - ST - ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition

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 or trustee 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: <b>S.R. Patel</b> SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR	<b>surekha Patel</b> Date	<b>8/26/06</b> Daytime Phone #
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August 11, 2006

Surekha Patel  
Sukhi Inc  
414 Eagle Ridge Dr  
Lake Wales, FL 33853

ATTACHMENT  
ATTACHMENT  
66023711

Division of Corporations  
P.O. Box 6198  
Tallahassee, FL 32314

Re: Document# P05000121154

To Whom It May Concern:

We've been in the middle of moving from home to home so never received your first notification about renewing our corporate name. I have enclosed a check with the amount for renewal. Please let me know if I need to do anything in order to get this taken care of.

If you have any questions please feel free to contact Sue Patel at 863- 676-2730.

-- -- Also, please send change the address you have listed to the following:

Pretzel Time  
Sukhi Inc  
414 Eagle Ridge Drive  
Lake Wales, FL 33853

Sincerely,

*S. R. Patel,*

Surekha Patel