2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P05000161015

Entity Name: SIDDHI VINAYAKA ENTERPRISES, INC.

FILED Apr 27, 2006 Secretary of State

Current Principa	al Place of Business:	New Principal Place of Business:

11700 SW 1ST STREET SITARA GROCERIES BLDG # 3 APT # 203 11264 PINES BLVD

PEMBROKE PINES, FL 33025 US PEMBROKE PINES, FL 33026 US

Current Mailing Address: New Mailing Address:

11700 SW 1ST STREET 11264 PINES BLVD

US

BLDG # 3 APT # 203 PEMBROKE PINES, FL 33026 US PEMBROKE PINES, FL 33025

FEI Number: 20-3917281 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

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

HARDASANI, HEMANT HARDASANI, HEMANT 11700 SW 1ST STREET BLDG #3 APT 203 11264 PINES BLVD PEMBROKE PINES, FL 33026 US

PEMBROKE PINES, FL 33025 US

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: 04/27/2006

> Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Delete Title: (X) Change () Addition

HARDASANI, HEMANT HARDASANI, HEMANT Name: Name: 11700 SW 1ST STREET BLDG #3 APT # 203 Address: 11264 PINES BLVD Address:

City-St-Zip: PEMBROKE PINES, FL 33025 US City-St-Zip: PEMBROKE PINES, FL 33026 US

() Delete Title: Title: VΡ (X) Change () Addition

HARDASNI, GOBINDRAM Name: HARDASNI, GOBINDRAM Name:

11700 SW 1ST STREET BLDG # 3 APT # 203 Address: 11264 PINES BLVD Address:

PEMBROKE PINES, FL 33025 US PEMBROKE PINES, FL 33026 US City-St-Zip: City-St-Zip:

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: HEMANT HARDASANI **PRES** 04/27/2006