

2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P06000010300

Entity Name: RIDDDHI SIDDHI PROPERTIES, INC.

FILED
Apr 24, 2008
Secretary of State

Current Principal Place of Business:

1020 S DALE MABRY HWY
TAMPA, FL 33629

New Principal Place of Business:

Current Mailing Address:

1020 S DALE MABRY HWY
TAMPA, FL 33629

New Mailing Address:

FEI Number: 20-4513488

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

PATEL, PANKAJ M
1020 S DALE MABRY HWY
TAMPA, FL 33629 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: PD () Delete
Name: PATEL, RAMILA P
Address: 3706 W JETTON AVE
City-St-Zip: TAMPA, FL 33629

Title: VP () Delete
Name: PATEL, JYOTSNA J
Address: 27 MYRON ST.
City-St-Zip: CLIFTON, NJ 07014

Title: ST () Delete
Name: PATEL, PANKAJ M
Address: 3706 W JETTON AVE
City-St-Zip: TAMPA, FL 33629

Title: D () Delete
Name: PATEL, JAYADEV R
Address: 27 MYRON ST.
City-St-Zip: CLIFTON, NJ 07014

Title: D () Delete
Name: PATEL, RAJENDRA R
Address: 9023 WESTBAY BLVD.
City-St-Zip: TAMPA, FL 33615

Title: D () Delete
Name: PATEL, UPENDRA C
Address: 19022 FERN MEADOW LOOP
City-St-Zip: LUTZ, FL 33558

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

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

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Address:
City-St-Zip:

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: PANKAJ M PATEL

ST

04/24/2008

Electronic Signature of Signing Officer or Director

Date