2009 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Feb 05, 2009
Secretary of State

DOCUMENT# P06000020725

Entity Name: SAI RAM OF PENSACOLA, INC.

Current Principal Place of Business:

4031STEFANI RD.
CANTONMENT, FL 32533

New Principal Place of Business:

4031 STEFANI ROAD
CANTONMENT, FL 32533

Current Mailing Address:

4031STEFANI RD.
CANTONMENT, FL 32533

New Mailing Address:

4031 STEFANI ROAD
CANTONMENT, FL 32533

FEI Number: 20-4277406 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

PATEL, CHAMPAKLAL M
4031 STEFANI RD.
CANTONMENT, FL 32533 US

Name and Address of New Registered Agent:

PATEL, CHAMPAKLAL M
4031 STEFANI ROAD
CANTONMENT, FL 32533 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: _____ 02/05/2009
Electronic Signature of Registered Agent — Date

Election Campaign Financing Trust Fund Contribution ( ).

OFFICERS AND DIRECTORS:

Title: P/D ( ) Delete
Name: PATEL, CHAMPAKLAL M
Address: 4031 STEFANI RD.
City-St-Zip: CANTONMENT, FL 32533

Title: S/D ( ) Delete
Name: PATEL, KISHOR P
Address: 14710 INNERARITY POINT RD.
City-St-Zip: PENSACOLA, FL 32507

Title: D ( ) Delete
Name: PATEL, RAMESH D
Address: 501 LUBBOCK ROAD
City-St-Zip: BROWNFIELD, TX 79316

Title: D ( ) Delete
Name: PATEL, MUKESH I
Address: 5205 PLA VADA DRIVE
City-St-Zip: BAKERSFIELD, CA 93306

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:

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: CHAMPAKLAL M. PATEL P/D 02/05/2009
Electronic Signature of Signing Officer or Director — Date