

2007 FOR PROFIT CORPORATION AMENDED ANNUAL REPORT

DOCUMENT# P06000025551

FILED
May 21, 2007
Secretary of State**Entity Name:** INDIA SPICE OF PT. ST. LUCIE, INC.**Current Principal Place of Business:**7145 S. US HWY. 1
PT. ST. LUCIE, FL 34952**New Principal Place of Business:****Current Mailing Address:**7145 S. US HWY. 1
PT. ST. LUCIE, FL 34952**New Mailing Address:****FEI Number:** **FEI Number Applied For (X)** **FEI Number Not Applicable ()** **Certificate of Status Desired ()****Name and Address of Current Registered Agent:**SAVDAS, VISHAL
7145 S. US HWY. 1
PT. ST. LUCIE, FL 34952 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

OFFICERS AND DIRECTORS:**Title:** P () Delete
Name: SAVDAS, VISHAL
Address: 5117 VICTORIA CIRCLE
City-St-Zip: WEST PALM BEACH, FL 33409**Title:** () Delete
Name:
Address:
City-St-Zip:**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:****Title:** () Change () Addition
Name:
Address:
City-St-Zip:**Title:** VP () Change (X) Addition
Name: MAJUMDER, SALIM
Address: 7145 SOUTH US HWAY # 1
City-St-Zip: PORT ST. LUCIE,, FL 34952

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: SAVDAS VISHAL

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05/21/2007

Electronic Signature of Signing Officer or Director

Date