2008 FOR PROFIT CORPORATION

FILED Feb 06. 2008 08:00 AM te

ANNUAL REPORT			Ten 00, 2000 00.00
DOCUMENT # P06000065412			Secretary of Star
Rentity Name NAVATARA ENTERPRISE INC.			
NAVATARA ENTERFRISE INC.	•		
Principal Place of Business Ma	ailing Address		
	11 N DIXIE AVENUE		
TITUSVILLE, FL 32796 T	ITUSVILLE, FL 32796		
,	•)
			01302008 No Chg-P CR2E034 (11/05)
DO NOT WRITE IN	N THIS SPA	CE	4. FEI Number Applied For
		, , ,	20-4851123 Not Applicable
, , , , , , , , , , , , , , , , , , ,			5. Certificate of Status Desired Fee Required
6. Name and Address of Current Regis	tered Agent		and the second of the second of the second
PARIKH, LEENA K			DO NOT WRITE
711 N DIXIE AVENUE TITUSVILLE, FL 32796		, * a.v.	IN THIS SPACE
			IN THIS SPACE
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 - LLPAVILLS			
Signature, typed or printed name of registered agent and title	if applicable (NOTE: Registere	ed Agent signature required	d when reinstating) DATE
FILE NOW!!! FEE IS \$150.00 After May 1, 2008 Fee will be \$550.00	Election Campaign Final Trust Fund Contribution.		.00 May Be led to Fees
10. OFFICERS AND DIRECTORS			1 (
TITLE D NAME PARIKH, LEENA K	•	51 · · · · · · · · · · · · · · · · · · ·	
STREET ADDRESS 711 N DIXIE AVENUE			
CITY-SI-ZIP TITUSVILLE, FL 32796			3. S.
TITLE NAME			
STREET ADDRESS CITY-ST-ZIP			U00000818309
TITLE		1	02/15/08-80037-004 150.00
NAME			, v physics
STREET ADDRESS CITY-ST-ZIP		Taranta Article	DO NOT WRITE
TITLE		1	IN THIS SPACE And
NAME STREET ADDRESS		e.s	
CITY-ST-ZIP		, , , , ,	
TITLE			
NAME STREET ADDRESS			
CITY-SI-ZIP		<u>.</u>	
TITLE NAME			
STREFT ADDRESS			

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: SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Daytime Phone ≠