

2007 FOR PROFIT CORPORATION ANNUAL REPORT

08-15-2007 90022 007 ***150.00
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FILED

07 SEP 20 AM 9:14

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # P06000089983

1. Entity Name
SREE BALAJI, INC



Principal Place of Business
2628 TAMiami TrL E
NAPLES, FL 34112

Mailing Address
2628 TAMiami TrL E
NAPLES, FL 34112

2. Principal Place of Business - No P.O. Box #

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

07302007

Chg-P

CR2E034 (12/06)

4. FEI Number

33-1140528

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

PATEL, AJAY R
2628 TAMiami TrL E
NAPLES, FL 34112

7. Name and Address of New Registered Agent

Name

Street Address (P.O. Box Number is Not Acceptable)

City

FL

Zip Code

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

Signature, typed or printed name of registered agent and date if applicable

(NOTE: Registered Agent signature is required when terminating)

DATE

FILE NOW!!! FEE IS \$150.00
Due by September 14, 2007

9. Election Campaign Financing
Trust Fund Contribution ☐

\$5.00 May Be
Added to Fees

In accordance with s. 607.193(2)(b), F.S., the
corporation did not receive the prior notice.

10. OFFICERS AND DIRECTORS

TITLE P ☐ Delete
NAME PATEL, AJAY
STREET ADDRESS 2628 TAMiami TrL E
CITY-STATE-ZIP NAPLES, FL 34112

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-STATE-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-STATE-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-STATE-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-STATE-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-STATE-ZIP

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-STATE-ZIP

TITLE D ☐ Change ☒ Addition
NAME Joseph Candito
STREET ADDRESS 2628 E Tamiami Tr
CITY-STATE-ZIP Naples, FL 34112

TITLE D ☐ Change ☒ Addition
NAME Laksmipathi Somavaram
STREET ADDRESS 2628 E Tamiami Tr
CITY-STATE-ZIP Naples, FL 34112

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-STATE-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-STATE-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-STATE-ZIP

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:

AR Patel

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

08/01/07 239 269 0126

Date

Daytime Phone #