

# 2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P07000049256

FILED  
May 01, 2008  
Secretary of State

Entity Name: MAHATHI SOFTWARE CORPORATION

## Current Principal Place of Business:

6233 LAKE BURDEN VIEW DRIVE  
WINDERMERE, FL 34786

## New Principal Place of Business:

480 NORTH ORLANDO AVENUE  
SUITE 218  
ORLANDO, FL 32789

## Current Mailing Address:

6233 LAKE BURDEN VIEW DRIVE  
WINDERMERE, FL 34786

## New Mailing Address:

480 NORTH ORLANDO AVENUE  
SUITE 218  
ORLANDO, FL 32789

FEI Number: 20-8898755

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

ANGELL CORPORATE SERVICES, INC.  
ONE NORTH CLEMATIS STREET SUITE 400  
WEST PALM BEACH, FL 33401 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

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

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: D ( ) Delete  
Name: PADMAVATHI, C.S. DR.  
Address: 10-27-14/A KAILASAMETTA, VISAKHAPATNAM  
City-St-Zip: AP INDIA 53003,

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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: DR. C.S. PADMAVATHI

DIR.

05/01/2008

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date