2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P07000087792

Entity Name: JYOT ENTERPRISES INC.

FILED May 01, 2009 Secretary of State

Current Principal Place of Business:	New Principal Place of Business:
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1212 N. MAIN STREET GAINESVILLE, FL 32601

Current Mailing Address: New Mailing Address:

1212 N. MAIN STREET GAINESVILLE, FL 32601

FEI Number: 26-0451653 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

RAI, KAMALJIT K
PUNWANI, AMEET A CPA
1212 N. MAIN STREET
2240 TWELVE OAKS WAY
GAINESVILLE, FL 32601 US
SUITE 102

WESLEY CHAPEL, FL 33544 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: AMEET A PUNWANI-CPA 05/01/2009

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:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: D () Delete Title: P (X) Change () Addition Name: RAI, GURBAX S Name: POWELL, DANE

 Address:
 1212 N. MAIN STREET
 Address:
 501 FM 1013 E

 City-St-Zip:
 GAINESVILLE, FL 32601
 City-St-Zip:
 CALL, TX 75933

Title: D () Delete Title: S (X) Change () Addition

 Name:
 RAI, KAMALJIT K
 Name:
 RAI, KAMALJIT K

 Address:
 1212 N. MAIN STREET
 Address:
 1212 N. MAIN STREET

 City-St-Zip:
 GAINESVILLE, FL 32601
 City-St-Zip:
 GAINESVILLE, FL 32601

Title: () Delete Title: VP () Change (X) Addition

Name: RAI, GURBAX

 Name:
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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: GURBAX RAI VP 05/01/2009