

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P07000108903

FILED
May 19, 2009
Secretary of State

Entity Name: SHRI HARI KABIR HOSPITALITY, INC.

Current Principal Place of Business:

2086 HIGHWAY 71 SOUTH
MARIANNA, FL 32448

New Principal Place of Business:

3100 APALACHE PKWY
TALLAHASSEE, FL 32311

Current Mailing Address:

2086 HIGHWAY 71 SOUTH
MARIANNA, FL 32448

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:

THOMPSON, SUSAN S ESQUIRE
3520 THOMASVILLE ROAD
FOURTH FLOOR
TALLAHASSEE, FL 32309 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: BHATKA, MAHESHKUMAR J
Address: 2086 HIGHWAY 71 SOUTH
City-St-Zip: MARIANNA, FL 32448

Title: D () Delete
Name: GOCOOOL, PARESH M
Address: 5238 WOODGATE WAY
City-St-Zip: MARIANNA, FL 32446

Title: D () Delete
Name: BHAKTA, RUPAL A
Address: 435 N TYNDALL PARKWAY
City-St-Zip: PANAMA CITY, FL 32404

Title: D () Delete
Name: DESAI, PRASANT
Address: 2086 HIGHWAY 71 SOUTH
City-St-Zip: MARIANNA, FL 32448

Title: D () Delete
Name: BHAKTA, NARENDRA
Address: 2086 HIGHWAY 71 SOUTH
City-St-Zip: MARIANNA, FL 32448

Title: D () Delete
Name: BHAKTA, BHARATBHAI
Address: 2086 HIGHWAY 71 SOUTH
City-St-Zip: MARIANNA, FL 32448

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: D (X) Change () Addition
Name: KANJI, JITESHKUMAR
Address: 3100 APALACHE PKWY
City-St-Zip: TALLAHASSEE, FL 32311

Title: () Change () Addition
Name:
Address:
City-St-Zip:

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: JITESH KANJI

GM

05/19/2009

Electronic Signature of Signing Officer or Director

Date