

# **2012 FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P09000080113

**FILED**  
**Feb 02, 2012**  
**Secretary of State**

**Entity Name:** MOTI MAHAL INDIAN STORE, INC.

**Current Principal Place of Business:**

1511 SE 47TH TER  
CAPE CORAL, FL 33904 US

**New Principal Place of Business:**

1515-A SE 47TH TER  
CAPE CORAL, FL 33904 US

**Current Mailing Address:**

5324 SW 11TH AVE  
CAPE CORAL, FL 33914 US

**New Mailing Address:**

**FEI Number:** 80-0486450      **FEI Number Applied For ( )**      **FEI Number Not Applicable ( )**      **Certificate of Status Desired ( )**

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

HENNING LAW FIRM, P.A.  
5621 STRAND BLVD.  
SUITE 105  
NAPLES, FL 34110 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

**OFFICERS AND DIRECTORS:**

**Title:** P  
**Name:** UTTAM, SIMONE  
**Address:** 1515-A SE 47TH TER  
**City-St-Zip:** CAPE CORAL, FL 33904 US

**Title:** VP  
**Name:** UTTAM, KAMAL JIT  
**Address:** 1511 SE 47TH TER  
**City-St-Zip:** CAPA CORAL, FL 33904 US

**Title:** S  
**Name:** BELLOT, TITUS L  
**Address:** 1509 SE 47TH TER  
**City-St-Zip:** CAPE CORAL, FL 33904 US

I hereby 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 all other like empowered.

**SIGNATURE:** S.U.

P

02/02/2012

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

\_\_\_\_\_  
Date