

# 2006 FOR PROFIT CORPORATION ANNUAL REPORT (AR)

**FILED**  
**Apr 26, 2006 8:00 am**  
**Secretary of State**

04-26-2006 90173 024 \*\*\*150.00

**DOCUMENT # P94000032676**

1. Entity Name

**GANESH ELECTRONICS, INC.**



Principal Place of Business

**5700 DOT COM COURT  
OVIDO FL 32765**

Mailing Address

**5700 DOT COM COURT  
OVIDO FL 32765**

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number

**59-3239523**

Applied For

Not Applicable

5. Certificate of Status Desired ☐

**\$8.75** Additional  
Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

**NATHOO, DALSUKH  
479 ZUREIQ POINT  
OVIDO FL 32765**

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 title if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

**FILE NOW!!! FEE IS \$150.00**

**After May 1, 2006 Fee Will Be \$550.00**

**Make Check Payable to Florida Department of State**

9. Election Campaign Financing  
Trust Fund Contribution. ☐

**\$5.00** May Be  
Added to Fees

10. OFFICERS AND DIRECTORS

TITLE **DP** ☐ Delete  
NAME **NATHOO, DALSUKH**  
STREET ADDRESS **3229 KNOTTY PINE AVE**  
CITY-ST-ZIP **WINTER PARK FL 32792**

TITLE **DVS** ☐ Delete  
NAME **CHAWHAN, PRAKASH I**  
STREET ADDRESS **14520 GAINESBOROUGH DR**  
CITY-ST-ZIP **ORLANDO FL 32826**

TITLE **DT** ☐ Delete  
NAME **CHAWHAN, RENUKA P**  
STREET ADDRESS **14520 GAINESBOROUGH DR.**  
CITY-ST-ZIP **ORLANDO FL 32826**

TITLE ☐ Delete  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Delete  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Delete  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE ☒ Change ☐ Addition  
NAME **NATHOO DALSUKH**  
STREET ADDRESS **479 ZUREIQ POINT**  
CITY-ST-ZIP **OVIDO FL 32765**

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

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

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Section 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:**

*Renuka Chawhan*

**RENUKA CHAWHAN**

**4/6/06**

**(407) 977 9167**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #