


**2006 FOR PROFIT CORPORATION  
ANNUAL REPORT**

**FILED**  
**Aug 02, 2006 08:00 AM**  
**Secretary of State**

<b>DOCUMENT # P96000077310</b>	
1. Entity Name <b>MAHUDI CORPORATION</b>	

Principal Place of Business <b>744 S. HIGHLANDS AVE. AVON PARK, FL 33825</b>	Mailing Address <b>1702 1/2 HWY 92 W AUBURNDALE, FL 33823</b>
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**DO NOT WRITE IN THIS SPACE**



07302006 No Chg-P CR2E034 (11/05)

4. FEI Number <b>65-0693992</b>	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	<b>\$8.75</b> Additional Fee Required

6. Name and Address of Current Registered Agent  <b>PATEL, HASMUKH M 744 S. HIGHLANDS AVE. AVON PARK, FL 33825</b>
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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 HAS MUKH. M. PATEL U00000573081  
Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) DATE 08/02/06-80001-0174150-00

<b>FILE NOW!!! FEE IS \$150.00 Due by September 8, 2006</b>	9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> <b>\$5.00</b> May Be Added to Fees	In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.
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10. OFFICERS AND DIRECTORS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D PATEL, HASMUKH M 1702 1/2 HIGHWAY 92 WEST AUBURNDALE, FL 33823
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D PATEL, KAPILA H 1702 1/2 HIGHWAY 92 WEST AUBURNDALE, FL 33823
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12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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: Hasmukh. M. Patel HASMUKH. M. PATEL 07-31-06  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

863-804-5534