

# 2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P96000081368

Entity Name: GOPAL CORPORATION

FILED  
Mar 09, 2005  
Secretary of State

## Current Principal Place of Business:

2909 KNIGHTS AVENUE  
TAMPA, FL 33611

## New Principal Place of Business:

## Current Mailing Address:

2909 KNIGHTS AVENUE  
TAMPA, FL 33611

## New Mailing Address:

FEI Number: 59-3404178

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

COLBY, ALFRED A  
101 EAST KENNEDY BLVD., SUITE 3140  
TAMPA, FL 33602 US

## Name and Address of New Registered Agent:

MASHRUWALA, ACHUT  
6204 N ARMENIA AVE  
TAMPA, FL 33604 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: ACHUT MASHRUWALA

03/09/2005

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: DPST ( ) Delete  
Name: CHOKSHI, SHEELA  
Address: 2909 KNIGHTS AVENUE  
City-St-Zip: TAMPA, FL 33611

Title: ( ) Delete  
Name:  
Address:  
City-St-Zip:

Title: ( ) Delete  
Name:  
Address:  
City-St-Zip:

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: DP (X) Change ( ) Addition  
Name: CHOKSHI, SHEELA  
Address: 2909 KNIGHTS AVENUE  
City-St-Zip: TAMPA, FL 33611

Title: T ( ) Change (X) Addition  
Name: ACHUT, MASHRUWALA  
Address: 6204 N ARMENIA AVE  
City-St-Zip: TAMPA, FL 33604

Title: S ( ) Change (X) Addition  
Name: MASHRUWALA, SONAL  
Address: 6204 N ARMENIA AVE  
City-St-Zip: TAMPA, FL 33604

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), 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: SONAL MASHRUWALA

S

03/09/2005

Electronic Signature of Signing Officer or Director

Date