2006 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 27, 2006
Secretary of State

DOCUMENT# P96000081368

Entity Name: GOPAL CORPORATION

Current Principal Place of Business:

2909 KNIGHTS AVENUE
TAMPA, FL 33611

New Principal Place of Business:

6204 N ARMENIA AVE
TAMPA, FL 33604

Current Mailing Address:

2909 KNIGHTS AVENUE
TAMPA, FL 33611

New Mailing Address:

6204 N ARMENIA AVE
TAMPA, FL 33604

FEI Number: 59-3404178 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

MASHRUWALA, ACHUT
6204 N ARMENIA AVE
TAMPA, FL 33604 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

Election Campaign Financing Trust Fund Contribution ( ).

OFFICERS AND DIRECTORS:

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

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

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

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

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

I hereby certify that the information supplied with this filing does not qualify for the 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: ACHUT MASHRUWALA TSD 04/27/2006
Electronic Signature of Signing Officer or Director — Date