2005 FOR PROFIT CORPORATION

FILED

ANNUAL REPORT						Jul 18, 2005 08:00 AN			
DOCUMENT # P97000063581 1. Entity Name SHIV SHANKAR DON'UT CORP.						Sec	retary (of State	
1	ce of Business LSBOROUGH AVE 33615 US	Р	ailing Address O BOX 260725 AMPA, FL 33685 US			<u> </u>			
С			N THIS SPA	CE	07112005 4. FEI Numb 65-077		CR2E034 (
6. Name and Address of Current Registered Agent HANDIN, GARY I 3111 UNIVERSITY DRIVE SUITE 404 CORAL SPRINGS, FL 33065				DO NOT WRITE IN THIS SPACE					
8. The above the obligate SIGNATURE	e named entity submits this s tions of registered agent. Signature, typed or printed name of re		urpose of changing its register applicable. (NOTE Register	ered office or registe	<u>.,,</u>	oth, in the State of Flo	orida. I am famil	ar with, and accept	
D	LE NOW!!! FEE IS \$1 ue by September 7,		5.00 May Be ded to Fees	In accordance corporation did	with s. 607.193 not receive the	(2)(b), F.S., the prior notice.			
TITLE NAME STREET ADDRESS CITY-ST-ZIP	P PATEL, CHIRAG P O BOX 260725 TAMPA, FL 33685	CERS AND DIREC	TORS			_		-	
NAME STREET ADDRESS CITY-ST-ZIP			· . <u>* * . * . * . * </u>	_		07/18/05	10373205 1-80005-1);	22 158.75	
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TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME				- -					
STREET ADDRESS CITY-ST-ZIP		$\overline{}$							

12. I hereby certify that the information supplied with his filling does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report or suppliemental report is frue 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 employed et 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 of the employed of the corporation of the corporation of the receiver of the 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 of the employed of the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report or supplied with his filling does not qualify for the exemption stated in Section 119.07(3)(ii), Florida Statutes. I further certify that the information indicated on this report of the corporation of the corporation of the exemption stated in Section 119.07(3)(ii), Florida Statutes. I further certify that the information indicated on this report of the corporation of the corporation of the corporation of the exemption stated in Section 119.07(3)(ii), Florida Statutes. I further certify that the information indicated on this report of the corporation of the corp

PPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

SIGNATURE!