2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P97000095127

City-St-Zip:

Title:

Name:

Address:

City-St-Zip:

STARKE, FL 32091

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FILED Apr 27, 2005 Secretary of State

Entity Name: SHIWANI INVESTMENT CORP. **Current Principal Place of Business: New Principal Place of Business:** 1101 N. TEMPLE AVE STARKE, FL 32091 **Current Mailing Address: New Mailing Address:** 1101 N. TEMPLE AVE STARKE, FL 32091 FEI Number: 65-0792394 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired () Name and Address of Current Registered Agent: Name and Address of New Registered Agent: PATEL, PARBHU 1101 N. TEMPLE AVE STARKE, FL 32091 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:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: Title: () Delete Title: (X) Change () Addition PATEL, PARBHU PATEL, PARBHU Name: Name: 1101 N TEMPLE AVENUE 1101 N TEMPLE AVENUE Address: Address: STARKE, FL 32091 City-St-Zip: STARKE, FL 32091 City-St-Zip: Title: Title: () Delete (X) Change () Addition Name: SURESH, PATEL Name: SURESH. PATEL 1290 TEMPLE N AVE 1290 TN EMPLE AVE Address: Address: STARKE, FL 32091 STARKE, FL 32091 City-St-Zip: City-St-Zip: Title: Title: (X) Change () Addition PST () Delete PATEL, PARBHU PATEL, PUSHPABEN Name: Name: 1101 N. TEMPLE AVE 1101 N. TEMPLE AVE Address: Address:

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.

City-St-Zip:

Title:

Name:

Address:

City-St-Zip:

STARKE, FL 32091

1290 N TEMPLE AVE

STARKE, FL 32091

PATEL, JASHU

() Change (X) Addition

SIGNATURE: PARBHU PATEL P 04/27/2005