

**2007 FOR PROFIT CORPORATION
ANNUAL REPORT**

FILED
Apr 30, 2007 08:00 AM
Secretary of State

DOCUMENT # P98000082532

1. Entity Name
BHAGYA NAGAR CORPORATION



Principal Place of Business
**1182 REDMAN STREET
ORLANDO, FL 32839**

Mailing Address
**4420 FM 1960 WEST, STE. 224
HOUSTON, TX 77068**



04162007 No Chg-P CR2E034 (11/05)

DO NOT WRITE IN THIS SPACE

4. FEI Number
74-2896263

Applied For
Not Applicable

5. Certificate of Status Desired ☐ **\$8.75 Additional
Fee Required**

6. Name and Address of Current Registered Agent

**WARD, DOUGLAS A
81 KING ST., STE. A
ST. AUGUSTINE, FL 32084**

**DO NOT WRITE
IN THIS SPACE**

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 _____

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE _____

**FILE NOW!!! FEE IS \$150.00
After May 1, 2007 Fee will be \$550.00**

9. Election Campaign Financing:
Trust Fund Contribution. ☐ **\$5.00 May Be
Added to Fees**

000000741617
05/15/07-20036-006 150.00

10. OFFICERS AND DIRECTORS

TITLE PD
NAME YALAMANCHILI, CHOWDARY
STREET ADDRESS 4420 FM 1960 WEST, STE. 224
CITY-STATE-ZIP HOUSTON, TX 77068

TITLE AVP
NAME OMANDAM, OLGA
STREET ADDRESS 4420 FM 1960 W #244
CITY-STATE-ZIP HOUSTON, TX 77068

TITLE S
NAME BELANGER, ANGELA
STREET ADDRESS 12204 CYPRESS CT
CITY-STATE-ZIP HOUSTON, TX

TITLE
NAME
STREET ADDRESS
CITY-STATE-ZIP

TITLE
NAME
STREET ADDRESS
CITY-STATE-ZIP

TITLE
NAME
STREET ADDRESS
CITY-STATE-ZIP

**DO NOT WRITE
IN THIS SPACE**

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: _____

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4-23-07

Date

2814441585

Daytime Phone #