

2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# V11866

Entity Name: AADI, INC.

FILED
Feb 03, 2005
Secretary of State

Current Principal Place of Business:

190 12TH STREET
ST. CLOUD, FL 34769

New Principal Place of Business:

Current Mailing Address:

190 E 12 ST
ST. CLOUD, FL 34769 US

New Mailing Address:

FEI Number: 59-3106566

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

SHAH, KAMLESH
13605 KIRBY SMITH RD.
ORLANDO, FL 32832 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: D () Delete
Name: SHAH, KAMLESH,
Address: 13605 KIRBY SMITH ROD
City-St-Zip: ORLANDO, FL 32832

Title: D () Delete
Name: SHAH, NARESH,
Address: 8673 MAR O WOR RD
City-St-Zip: PALM BCH GARDEN, FL 33418

Title: D () Delete
Name: SHAH, B. C.,
Address: 4758 CAOMBAHEE LANE
City-St-Zip: ORLANDO, FL

Title: D () Delete
Name: SHAH, VASANT,
Address: 8183 MA O WAR ROAD
City-St-Zip: WEST PALM BEACH, FL 33418

Title: D () Delete
Name: SHAH, ASHOK,
Address: 4758 COMBAHEE LANE
City-St-Zip: ORLANDO, FL

Title: D () Delete
Name: SHAH, KIRIT,
Address: 6663 HATTERS DR
City-St-Zip: LAKEWORTH, FL

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

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

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

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

Title: D (X) Change () Addition
Name: SHAH, KIRIT,
Address: 115 SEGOVIA WAY
City-St-Zip: JUPITER, FL 33458 US

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: KAMLESH SHAH

PRES

02/03/2005

Electronic Signature of Signing Officer or Director

Date