

2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# V18550

Entity Name: VIKRAM, INC.

FILED
Apr 28, 2005
Secretary of State

Current Principal Place of Business:

ORMOND BEACH MKT PLACE
NORTH NOVA ROAD
ORMOND BEACH, FL 32174

New Principal Place of Business:

Current Mailing Address:

303 BIRCHWOOD PK DRIVE
JERICHO, NY 11753

New Mailing Address:

FEI Number: 11-3109577

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

SZYMANSKI, RONALD SR
84 COMANCHE CT.
PALM COAST, FL 32137 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: GUPTA, RAJESH K.,
Address: 1986 STEWART AVENUE
City-St-Zip: NEW HYDE PARK, NY

Title: D () Delete
Name: BAJAJ, DR. RANDHIR,
Address: 85 COACHMEN PLACE WEST
City-St-Zip: MUTTONTOWN, NY

Title: D () Delete
Name: VERMA, DR. SHYAM,
Address: 801 GARDEN ST
City-St-Zip: TITUSVILLE, FL

Title: D () Delete
Name: DATT, NEERAJ
Address: 76-36 265TH STREET
City-St-Zip: NEW HYDE PARK, NY 11040

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:

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: N DATT

D

04/28/2005

Electronic Signature of Signing Officer or Director

_____ Date