

# 2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# V18550

Entity Name: VIKRAM, INC.

FILED  
Apr 18, 2008  
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:**

GUPTA, RAJESH K.  
1986 STEWART AVENUE  
NEW HYDE PARK, NY 11040

**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:**

ROBINSON, ROB  
ONE HARGROVE GRADE, SUITE 1  
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 11040

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 exemption stated 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 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: RANDHIR BAJAJ

D

04/18/2008

Electronic Signature of Signing Officer or Director

\_\_\_\_\_ Date