

2014 FLORIDA PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P13000002999

Entity Name: NAMA SHIVAY, INC.**Current Principal Place of Business:**12626 TROPIC DR E
JACKSONVILLE, FL 32225**Current Mailing Address:**12626 TROPIC DR E
JACKSONVILLE, FL 32225 US**FEI Number:** 46-1727366**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**SHAH, SMITA V
12626 TROPIC DR E
JACKSONVILLE, FL 32225 US*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**Officer/Director Detail :**

Title	P
Name	SHAH, SMITA V
Address	12626 TROPIC DR E
City-State-Zip:	JACKSONVILLE FL 32225

Title	TRE
Name	SMITA, SHAH V
Address	12626 TROPIC DR E
City-State-Zip:	JACKSONVILLE FL 32225

Title	VP
Name	SHAH, RAJ V
Address	12626 TROPIC DR E
City-State-Zip:	JACKSONVILLE FL 32225

Title	SEC
Name	SHAH, RAJ V
Address	12626 TROPIC DR E
City-State-Zip:	JACKSONVILLE FL 32225

Title	DIR
Name	SHAH, VRAJESH
Address	12626 TROPIC DR E
City-State-Zip:	JACKSONVILLE FL 32225

I hereby 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 all other like empowered.

SIGNATURE: VRAJESH SHAH**DIR****03/17/2014**_____
Electronic Signature of Signing Officer/Director Detail_____
Date