## 2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# N01000005175

FILED Apr 28, 2004 Secretary of State

Entity Name: SADHU VASWANI SATSANG CENTER OF MIAMI, INC.

**Current Principal Place of Business: New Principal Place of Business:** 2470 NW 102 PLACE SUITE#205 MIAMI, FL 33172 **New Mailing Address: Current Mailing Address:** 2470 NW 102 PLACE SUITE#205 MIAMI, FL 33172 FEI Number: 65-1052571 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( ) Name and Address of Current Registered Agent: Name and Address of New Registered Agent: GURBANI, HARI 2470 NW 102 PLACE SUITE#205 MIAMI, FL 33172 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 **OFFICERS AND DIRECTORS:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: () Delete (X) Change ( ) Addition SUJAN, TIKAM SUJAN, TIKAM Name: Name: Address: 7521 NW 52 STREET Address: 7521 NW 52 STREET City-St-Zip: MIAMI, FL 33166 City-St-Zip: MIAMI, FL 33166 Title: Title: (X) Change ( ) Addition ( ) Delete Name: KHILNANI, SURESH Name: KHILNANI, SURESH Address: 990 NW 123 COURT Address: 990 NW 123 COURT City-St-Zip: MIAMI, FL 33182 City-St-Zip: MIAMI, FL 33182 Title: () Delete Title: () Change () Addition NEBHRAJANI, BHARAT Name: Name: 12882 SW 115 TERRACE Address: Address: City-St-Zip: MIAMI, FL 33186 City-St-Zip: Title: () Delete Title: ( ) Change (X) Addition Name: Name: GURBANI, HARI 8500 MENTEITH TERRACE Address: Address: City-St-Zip: City-St-Zip: HIALEAH, FL 33016

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 617, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: HARI GURBANI P 04/28/2004