

# 2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N01000005175

FILED  
Mar 24, 2009  
Secretary of State

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

**Current Principal Place of Business:**

2470 NW 102 PLACE  
SUITE#205  
MIAMI, FL 33172

**New Principal Place of Business:**

**Current Mailing Address:**

2470 NW 102 PLACE  
SUITE#205  
MIAMI, FL 33172

**New Mailing Address:**

FEI Number: 65-1052571

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

**Name and Address of Current Registered Agent:**

GURBANI, HARI  
2470 NW 102 PLACE  
SUITE#205  
MIAMI, FL 33172 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

**OFFICERS AND DIRECTORS:**

Title: S ( ) Delete  
Name: SUJAN, TIKAM  
Address: 7521 NW 52 STREET  
City-St-Zip: MIAMI, FL 33166

Title: T ( ) Delete  
Name: KHILNANI, SURESH  
Address: 990 NW 123 COURT  
City-St-Zip: MIAMI, FL 33182

Title: D ( ) Delete  
Name: NEBHRAJANI, BHARAT  
Address: 12882 SW 115 TERRACE  
City-St-Zip: MIAMI, FL 33186

Title: P ( ) Delete  
Name: GURBANI, HARI  
Address: 8500 MENTEITH TERRACE  
City-St-Zip: HIALEAH, FL 33016

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

SIGNATURE: SURESH KHILNANI

T

03/24/2009

Electronic Signature of Signing Officer or Director

Date