

**2004 NOT-FOR-PROFIT CORPORATION-
ANNUAL REPORT**

FILED
Mar 31, 2004 08:00 AM
Secretary of State

DOCUMENT # N95000004714 1. Entity Name PUNJABI SANGH OF FLORIDA, INC.	
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Principal Place of Business 9132 BAYWARD CT. ORLANDO, FL 32819	Mailing Address 10112 CANOPY TREE CT. ORLANDO, FL 32836
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DO NOT WRITE IN THIS SPACE



03262004 No Chg-NP CR2E037 (10/03)

4. FEI Number 59-3343735	Applied For Not Applicable
5. Certificate of Status Desired ☐	\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent ARORA, VINNIE 10112 CANOPY TREE COURT ORLANDO, FL 32836	DO NOT WRITE IN THIS SPACE
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8. 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. I am familiar with, and accept the obligations of registered agent.

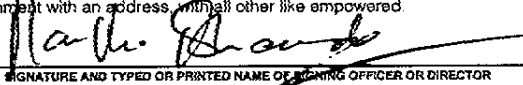
SIGNATURE _____ (NOTE: Registered Agent signature required when reinstating) DATE _____

Filing Fee is \$61.25 Due by May 1, 2004	9. Election Campaign Financing Trust Fund Contribution. ☐	\$5.00 May Be Added to Fees	100000099848 03/31/04-80026-003 61.25
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10. OFFICERS AND DIRECTORS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DP SACHDEV, YASH DR. 3504 TRAVES PLACE TITUSVILLE, FL 32780
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DS BHANDARI, RANBIR 9132 BAYWARD STREET ORLANDO, FL 32819
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DT DEEPAK, KALS! 5537 BAYSIDE DRIVE ORLANDO, FL 32819
TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	

**DO NOT WRITE
IN THIS SPACE**

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(f), Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: 	3/27/04 (407)-876-1384
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR	Date Daytime Phone #