

2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N99000007091

FILED
Apr 26, 2006
Secretary of State

Entity Name: PUNJABI ASSOCIATION OF AMERICA, INC.

Current Principal Place of Business:

5408 BURNT HICKORY DRIVE
VALRICO, FL 33594

New Principal Place of Business:

1082 E. BRANDON BLVD
BRANDON, FL 33511

Current Mailing Address:

5408 BURNT HICKORY DRIVE
VALRICO, FL 33594

New Mailing Address:

PO BOX 3550
BRANDON, FL 335093550

FEI Number: 59-3611833

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

BRAR, AMRIT
5408 BURNT HICKORY DRIVE
VALRICO, FL 33594 US

Name and Address of New Registered Agent:

DHALIWAL, AMARJIT
1082 E. BRANDON BLVD
BRANDON, FL 33511 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: AMARJIT S. DHALI WAL

04/26/2006

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: D () Delete
Name: RATTAN, PAWAN K M.D.
Address: 360 B SOUTH PLANT AVE
City-St-Zip: TAMPA, FL 33606

Title: D () Delete
Name: BRAR, AMRIT
Address: 5408 BURNT HICKORY DRIVE
City-St-Zip: VALRICO, FL 33594

Title: VPD () Delete
Name: RATTI, J.S.
Address: 15421-7 PLANTATION OAKS DR.
City-St-Zip: TAMPA, FL 33647

Title: PD () Delete
Name: DHALI WAL, AMARJIT S
Address: 122 BARRINGTON DR.
City-St-Zip: BRANDON, FL 33511

Title: D () Delete
Name: KAHLON, DAVINDER S MD
Address: 5408 BURNT HICKORY DRIVE
City-St-Zip: VALRICO, FL 33594

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: PD (X) Change () Addition
Name: DHALI WAL, AMARJIT S
Address: 1082 E. BRANDON BLVD
City-St-Zip: BRANDON, FL 33511

Title: D (X) Change () Addition
Name: KAHLON, DAVINDER S MD
Address: 9031 SOUTHERN BREEZE DRIVE
City-St-Zip: ORLANDO, FL 32836

I hereby certify that the information supplied with this filing does not qualify for the 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: AMARJIT S. DHALI WAL

PD

04/26/2006

Electronic Signature of Signing Officer or Director

Date