

2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT**FILED
Jul 08, 2008
Secretary of State**

DOCUMENT# N99000007091

Entity Name: PUNJABI ASSOCIATION OF AMERICA, INC.

Current Principal Place of Business:1082 E. BRANDON BLVD
BRANDON, FL 33511**New Principal Place of Business:****Current Mailing Address:**PO BOX 3550
BRANDON, FL 335093550**New Mailing Address:**FEI Number: 59-3611833 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()
In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.**Name and Address of Current Registered Agent:**DHALI WAL, AMARJIT
1082 E. BRANDON BLVD
BRANDON, FL 33511 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: D () Delete
Name: DHALI WAL, GUNWANT S M.D.
Address: 1032 TOSKI DR
City-St-Zip: NEW PORT RICHEY, FL 34655Title: D () Delete
Name: BRAR, AMRIT
Address: 5408 BURNT HICKORY DRIVE
City-St-Zip: VALRICO, FL 33594Title: VPD () Delete
Name: RATTI, J.S.
Address: 15421-7 PLANTATION OAKS DR.
City-St-Zip: TAMPA, FL 33647Title: PD () Delete
Name: DHALI WAL, AMARJIT S
Address: 1082 E. BRANDON BLVD
City-St-Zip: BRANDON, FL 33511Title: D () Delete
Name: KAH LON, DAVINDER S MD
Address: 9031 SOUTHERN BREEZE DRIVE
City-St-Zip: ORLANDO, FL 32836**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: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: AMARJIT S. DHALI WAL

MR.

07/08/2008

Electronic Signature of Signing Officer or Director

Date