2012 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 27, 2012
Secretary of State

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Entity Name: VIVEK WELFARE AND EDUCATIONAL FOUNDATION, INC.

Current Principal Place of Business:

C/O BRAHAM R AGGARWAL
5200 VINELAND RD, SUITE 200
ORLANDO, FL 32811

New Principal Place of Business:

Current Mailing Address:

C/O BRAHAM R AGGARWAL
5200 VINELAND RD, SUITE 200
ORLANDO, FL 32811

New Mailing Address:

FEI Number: 59-3629507 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

GUPTA, SURESH
5200 VINELAND RD, SUITE 200
ORLANDO, FL 32811 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: C
Name: AGGARWAL, BRAHAM R
Address: 5200 VINELAND RD STE 200
City-St-Zip: ORLANDO, FL 32811

Title: TD
Name: GUPTA, SURESH K
Address: 5200 VINELAND RD STE 200
City-St-Zip: ORLANDO, FL 32811

Title: PS
Name: DWIVEDI, ABHINAV
Address: 113 N ECONLOCKHATCHEE TRAIL
City-St-Zip: ORLANDO, FL 32825 US

Title: VPD
Name: BREWER, MARK
Address: P.O./ BOX 20741
City-St-Zip: ORLANDO, FL 32808

Title: D
Name: JOSHI, NIKHIL
Address: 10108 EVERGREEN HILL DRIVE
City-St-Zip: TAMPA, FL 33647

Title: D
Name: SARAIYA, CHANDRESH
Address: 38029 ARBOR RIDGE
City-St-Zip: ZEPHYRHILLS, FL 33540

I hereby 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 all other like empowered.

SIGNATURE: SURESH GUPTA RA 04/27/2012
Electronic Signature of Signing Officer or Director Date