

2022 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N13000006649

Entity Name: KRISHNA WEST, INC.

Current Principal Place of Business:

1515 NW 7TH PLACE
GAINESVILLE, FL 32603

Current Mailing Address:

1515 NW 7TH PLACE
GAINESVILLE, FL 32603 US

FEI Number: 46-3412224

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

COHEN, ROBERT
1515 NW 7TH PLACE
GAINESVILLE, FL 32603 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: _____

Electronic Signature of Registered Agent

_____ Date

Officer/Director Detail :

Title D
Name RESNICK, HOWARD J
Address 1515 NW 7TH PLACE
City-State-Zip: GAINESVILLE FL 32603

Title PD
Name COHEN, ROBERT
Address 1515 NW 7TH PL
City-State-Zip: GAINESVILLE FL 32603

Title DS
Name LINKOGLE, YONKA DIMITROVA
Address 414 WEST 4TH STREET
City-State-Zip: LONG BEACH CA 90802

Title VPD
Name DECASTRO, GOVINDA
Address 2801 SOUTH LAKELINE BLVD - APT.
1230
City-State-Zip: AUSTIN TX 78612

Title D
Name MORALES, OLYMPIA VITALIA
Address 4342 W. POINT LOMA BLVD #D
City-State-Zip: SAND DIEGO CA 92107

Title D
Name SHARMA, SHIVA NAND
Address FLAT 42, VENTURA HOUSE 19 WEST
STREET
City-State-Zip: BASINGSTOKE, UK RG21 7BT AL

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: ROBERT COHEN

DIRECTOR

05/15/2022

Electronic Signature of Signing Officer/Director Detail

Date