

2023 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N13000006649

Entity Name: KRISHNA WEST, INC.**Current Principal Place of Business:**224 NE 10TH AVE
GAINESVILLE, FL 32601**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	D
Name	SHARMA, SHIVA NAND
Address	FLAT 42, VENTURA HOUSE 19 WEST STREET
City-State-Zip:	BASINGSTOKE, UK RG21 7BT AL

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

Title	DIRECTOR
Name	PATALON, TAL TOVA DR.
Address	NESHER 14
City-State-Zip:	CAESAREA

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**PRESIDENT****04/01/2023**_____
Electronic Signature of Signing Officer/Director Detail_____
Date