NOT-FOR-PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR) YEAR: 2002. FILED

02 NOV 12 PM 2:00

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # 763000

1. Entity Name
BENGALI SOCIETY OF FLORIDA, INC.,

800008957228
11/13/02--01057--011 **297.50

REINSTATEMENT 02
DO NOT WRITE IN THIS SPACE

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2. Principal Place of Business	3. Mailing Address
3138 CRANES COVE LOOP	3138 CRANES COVE LOOP
Suite, Apt. #, etc.	Suite, Apt. #, etc.
City & State: KISSIMMEE, FL	City & State: KISSIMMEE, FL
Zip: 34741 Country: USA	Zip: 34741 Country: USA

4. FEI Number: 59-2345688 ☐ Applied For ☐ Not Applicable

5. Certificate of Status Desired ☐ **$8.75** Additional Fee Required

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7. Name and Address of Current Registered Agent

Name: SOUMITRA DE

Street Address (P.O. Box Number is Not Acceptable): 3138 CRANES COVE LOOP

City: KISSIMMEE FL Zip Code: 34741

8. 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: Soumitra De. DATE: 11/2/02.

Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

FEE IS $61.25 Initial or Amended UBR

9. Election Campaign Financing Trust Fund Contribution. ☐ **$5.00** May Be Added to Fees

Make Check Payable to Department of State

10. OFFICERS AND DIRECTORS

TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	
PD	SOUMITRA DE 3138 CRANES COVE LOOP KISSIMMEE, FL 34741
VD	JHUNU MOHAPATRA 3927 MUZANTE COURT ORLANDO, FL 32817
TD	SREEMOY GHOSH 6302 C MARKSTOWN DRIVE TAMPA, FL 33617
TD	MALLIKA KAPAT, 3437 STERLING LAKE CIRCLE OVEIDO, FL 32765
SD	RUPA SARKAR, 14350 NOTTINGHAM WAY CIRCLE ORLANDO, FL 32765
SD	KUNAL MITRA 6042 NEWBERRY CIRCLE MELBOURNE, FL 32940

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CR2E037B (12/01)

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my 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 in Block 10 or on an attachment with an address, with all other like empowered.

SIGNATURE: Soumitra De (SOUMITRA DE) 11/2/02. 407-828-3327

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #