

# 2009 NOT-FOR-PROFIT CORPORATION REINSTATEMENT

DOCUMENT# F02000002728

Entity Name: BAPS CHARITIES, INC.

FILED  
Oct 02, 2009  
Secretary of State

## Current Principal Place of Business:

81 SUTTONS LANE  
SUITE 201  
PISCATAWAY, NJ 08854

## New Principal Place of Business:

## Current Mailing Address:

81 SUTTONS LANE  
SUITE 201  
PISCATAWAY, NJ 08854

## New Mailing Address:

FEI Number: 77-0533155      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:

## Name and Address of New Registered Agent:

PATEL, NIBODH  
541 SOUTHEAST 18TH AVENUE  
BOYNTON BEACH, FL 33435      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: NIBODH PATEL

Electronic Signature of Registered Agent

Date

## OFFICERS AND DIRECTORS:

Title: PD      ( ) Delete  
Name: PATEL, NILKANTH  
Address: 2939 DOUBLE LAKE  
City-St-Zip: MISSOURI CITY, TX 77459

Title: VD      ( ) Delete  
Name: MEHTA, ANAND  
Address: 8240 HIGH HAMPTON CHASE  
City-St-Zip: ALPHARETTA, GA 30022

Title: STD      ( ) Delete  
Name: AMIN, BHAVESH  
Address: 5849 FOX HILL RD  
City-St-Zip: HILLIARD, OH 43026

Title: D      ( ) Delete  
Name: VAGHASIA, GOVIND  
Address: 2943 OLNEY PL  
City-St-Zip: BURBANK, CA 91504

Title: D      ( ) Delete  
Name: PARMAR, YOGENDRA  
Address: 1379 OMARA DR  
City-St-Zip: UNION, NJ 07083

Title: D      ( ) Delete  
Name: RAJA, PRAFUL  
Address: 4 ROSS AVE  
City-St-Zip: EDISON, NJ 08820

## 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:

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: NILKANTH PATEL

PD

10/02/2009

Electronic Signature of Signing Officer or Director

Date