2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 01, 2008
Secretary of State

DOCUMENT# F03000001508

Entity Name: RAJASTHAN ASSOCIATION OF NORTH AMERICA, INC.

Current Principal Place of Business:

1309 MIDDLE RIVER DR
FORT LAUDERDALE, FL 33304

New Principal Place of Business:

Current Mailing Address:

1309 MIDDLE RIVER DR
FORT LAUDERDALE, FL 33304

New Mailing Address:

FEI Number: 11-3512043 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

GUPTA, VIJAY K
1309 MIDDLE RIVER DR
FORT LAUDERDALE, FL 33304 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	( ) Delete
Name:	MEHTA, K.K. MBA,CPA	
Address:	42 BRISTOL DR.	
City-St-Zip:	NORTH HILLS, NY 11030	
Title:	VC	( ) Delete
Name:	SHAH, NAVEEN C	
Address:	BRIDAL PATH COURT	
City-St-Zip:	MUTTONTOWN, NY 11595	
Title:	D	( ) Delete
Name:	ARYA, VIJAY	
Address:	35 SUNSET RD. SOUTH	
City-St-Zip:	SEARINGTON, NY 11507	
Title:	D	( ) Delete
Name:	LODHA, AJAY	
Address:	7 OAKRIDGE LN.	
City-St-Zip:	ROSLYN, NY 11576	
Title:	PST	( ) Delete
Name:	GUPTA, V. JAY K	
Address:	1309 MIDDLE RIVER DR	
City-St-Zip:	FORT LAUDERDALE, FL 33304	
Title:	VP	( ) Delete
Name:	GUPTA, ASHA	
Address:	1309 MIDDLE RIVER DR	
City-St-Zip:	FORT LAUDERDALE, FL 33304	

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: VIJAY K. GUPTA PST 04/01/2008
Electronic Signature of Signing Officer or Director — Date